| Fill in this information to identify your case: | | |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| EASTERN DISTRICT OF NORTH CAROLINA | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | ☐ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| rt 1: Identify Yourself | | | |
|--|---|--|---|
| | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
| Your full name | | | |
| Write the name that is on | Anthony | | Kristie |
| your government-issued picture identification (for example, your driver's | First name | | First name |
| license or passport). | Middle name | | Middle name |
| Bring your picture | Wilson | | Wilson |
| identification to your meeting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | | Last name and Suffix (Sr., Jr., II, III) |
| All other names you have used in the last 8 years | 9 | | Kristie D. Wilson Kristie Denise Wilson |
| Include your married or maiden names. | | | Kristie Denise Wilson |
| Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-1051 | | xxx-xx-2974 |
| | Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number About Debtor 1: Anthony First name Wilson Last name and Suffix (Sr., Jr., II, III) xxx-xx-1051 | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Middle name Wilson Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number |

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Debtor 1 Anthony Wilson Debtor 2 Kristie Wilson

Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|---|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) EINs | ■ I have not used any business name or EINs. Business name(s) EINs |
| 5. | Where you live | 56 Peanut Drive | If Debtor 2 lives at a different address: |
| | | Roanoke Rapids, NC 27870 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | Halifax | |
| | | County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

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| Debtor 1 Anthony Wilson Debtor 2 Kristie Wilson | | | | | | Case number (if known) | | | |
|---|---|---|---|---|---|---|--|--|--|
| Par | t 2: Tell the Court About | Your Bank | ruptcy Case | | | | | | |
| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | | |
| | choosing to file under | ☐ Chapter 7 | | | | | | | |
| | | ☐ Chap | ter 11 | | | | | | |
| | | ☐ Chap | ter 12 | | | | | | |
| | | ■ Chap | ter 13 | | | | | | |
| 8. | How you will pay the fee | abo ord a p | out how you may der. If your attorn ore-printed addre | y pay. Typically, if y ney is submitting yo ess. | ou are paying the fe ur payment on your l | theck with the clerk's office in your local court for more details e yourself, you may pay with cash, cashier's check, or money behalf, your attorney may pay with a credit card or check with | | | |
| | | | | fee in installments nstallments (Official | | option, sign and attach the Application for Individuals to Pay | | | |
| | | □ I re but ap | equest that my t is not required plies to your fam | fee be waived (Yo to, waive your fee, nily size and you are | u may request this op and may do so only i e unable to pay the fe | ption only if you are filing for Chapter 7. By law, a judge may, if your income is less than 150% of the official poverty line that ee in installments). If you choose this option, you must fill out Official Form 103B) and file it with your petition. | | | |
| | | | | | | | | | |
| 9. | Have you filed for bankruptcy within the | ■ No. | | | | | | | |
| | last 8 years? | ☐ Yes. | | | | | | | |
| | | | District | | | Case number | | | |
| | | | District | | When | Case number | | | |
| | | | District | | When | Case number | | | |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ■ No □ Yes. | | | | | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | | | |
| 11. | Do you rent your | ■ No. | Go to line 12 | 2. | | | | | |
| | residence? | ☐ Yes. | Has your lar | ndlord obtained an e | eviction judgment aga | ainst you and do you want to stay in your residence? | | | |
| | | | ☐ No. 0 | Go to line 12. | | | | | |
| | | | | Fill out <i>Initial State</i> cruptcy petition. | ment About an Evicti | ion Judgment Against You (Form 101A) and file it with this | | | |
| | | | | | | | | | |

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| | otor 1 Anthony Wilson otor 2 Kristie Wilson | | | Case number (if known) | | | |
|-----|---|------------------------|---|---|--|--|--|
| Par | t3: Report About Any Bu | sinesses | You Own as a Sole Proprie | tor | | | |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to Part 4. | | | | |
| | | ☐ Yes. | Name and location of bus | siness | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name of business, if any | | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Number, Street, City, Sta | te & ZIP Code | | | |
| | it to this petition. | | | | | | |
| | | | Health Care Business (as defined in 11 U.S.C. § 101(27A)) | | | | |
| | | | ☐ Single Asset Rea | Estate (as defined in 11 U.S.C. § 101(51B)) | | | |
| | | | ☐ Stockbroker (as o | lefined in 11 U.S.C. § 101(53A)) | | | |
| | | | ☐ Commodity Broke | er (as defined in 11 U.S.C. § 101(6)) | | | |
| | | | ☐ None of the above | e | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadline: operation | are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate nes. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ions, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure J.S.C. 1116(1)(B). | | | | |
| | For a definition of small | ■ No. | I am not filing under Cha | oter 11. | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Chapter Code. | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy | | | |
| | | ☐ Yes. | I am filing under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | | |
| Par | t 4: Report if You Own or | Have Any | Hazardous Property or An | y Property That Needs Immediate Attention | | | |
| 14. | Do you own or have any | ■ No. | | | | | |
| | property that poses or is alleged to pose a threat of imminent and identifiable hazard to | ☐ Yes. | What is the hazard? | | | | |
| | public health or safety? Or do you own any property that needs | | If immediate attention is | | | | |
| | immediate attention? | | needed, why is it needed? | | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is the property? | | | | |
| | - <i>'</i> | | | Number, Street, City, State & Zip Code | | | |
| | | | | | | | |

Debtor 1 Anthony Wilson Debtor 2 Kristie Wilson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Deb | tor 1 Anthony Wilson tor 2 Kristie Wilson | | | | Case number (if k | known) |
|------|---|---|---|---|--|--|
| Part | 6: Answer These Questi | ons for R | eporting Purposes | | | |
| 16. | What kind of debts do you have? | 16a. | Are your debts primarily consummation individual primarily for a personal, □ No. Go to line 16b. | | | in 11 U.S.C. § 101(8) as "incurred by an |
| | | 16b. | ■ Yes. Go to line 17. Are your debts primarily busines money for a business or investmen □ No. Go to line 16c. □ Yes. Go to line 17. | | | |
| | | 16c. | State the type of debts you owe that | at are not consur | ner debts or business de | ebts |
| 17. | Are you filing under Chapter 7? | ■ No. | I am not filing under Chapter 7. Go | to line 18. | | |
| | Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | ☐ Yes. | I am filing under Chapter 7. Do you are paid that funds will be available ☐ No ☐ Yes | | | is excluded and administrative expenses |
| 18. | How many Creditors do you estimate that you owe? | ■ 1-49 □ 50-99 □ 100-1 □ 200-9 | 99 | □ 1,000-5,000 □ 5001-10,000 □ 10,001-25,00 | | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000 |
| 19. | How much do you estimate your assets to be worth? | □ \$100, | 50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million | \$1,000,001 - \$10,000,001 \$50,000,001 \$100,000,00 | - \$50 million - \$100 million | □ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion |
| 20. | How much do you estimate your liabilities to be? | = \$100, | 50,000 001 - \$100,000 001 - \$500,000 001 - \$1 million | \$1,000,001 - \$10,000,001 \$10,000,001 \$50,000,001 \$100,000,000 | - \$50 million | □ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion |
| Part | 7: Sign Below | | | | | |
| For | you | If I have United S If no atto documer I request I underst bankrupt and 357' /s/ Ar Anthor Signature | tates Code. I understand the relief a rney represents me and I did not part, I have obtained and read the notion relief in accordance with the chapter and making a false statement, concept case can result in fines up to \$25 | aware that I may vailable under early or agree to pay ce required by 11 or of title 11, Unite ealing property, or | or proceed, if eligible, und ach chapter, and I choose someone who is not an U.S.C. § 342(b). | ler Chapter 7, 11,12, or 13 of title 11, e to proceed under Chapter 7. attorney to help me fill out this d in this petition. operty by fraud in connection with a s, or both. 18 U.S.C. §§ 152, 1341, 1519, |
| | | LAGUUIG | MM/DD/YYYY | | | D/YYYY |

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| | Anthony Wilson | Case number (if known) | |
|----------|----------------|------------------------|--|
| Debioi 2 | Kristie Wilson | Case Humber (# known) | |

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Lenita M. W. Arrington | Date | September 27, 2016 |
|---|------------|------------------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| Lenita M. W. Arrington | | |
| Printed name | | |
| Law Office of Lenita Webb Arrington, PLLC | | |
| Firm name | | |
| 1027 East Tenth Street | | |
| Roanoke Rapids, NC 27870 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone (252) 410-0100 Ema | il address | lenita@attorneyarrington.com |
| 25755 | | |
| Bar number & State | | _ |



Agency Number: 0805-CC-00054

Certificate Number: BC-6562091-01394091

Bankruptcy Case Number:

Judicial District: Eastern District of North Carolina

Bankruptcy Briefing Certificate

I CERTIFY that on 9/27/2016, Anthony Wilson received from GreenPath, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Eastern District of North Carolina judicial district an individual briefing conducted Internet that complied with the provisions of 11 U.S.C. § § 109(h) and 111. A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This does not certify that you can or should file for bankruptcy. Those are decisions that can only be made by you with the help of a licensed bankruptcy attorney.

Kristen L. Holt

President & Chief Executive Officer

Kuster L. Holt

GreenPath, Inc.

^{*} Individuals who wish to file for bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. § \$ 109(h) and 521(b).



Agency Number: 0805-CC-00054

Certificate Number: BC-6562091-01394092

Bankruptcy Case Number:

Judicial District: Eastern District of North Carolina

Bankruptcy Briefing Certificate

I CERTIFY that on 9/27/2016, Kristie Wilson received from GreenPath, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Eastern District of North Carolina judicial district an individual briefing conducted Internet that complied with the provisions of 11 U.S.C. § § 109(h) and 111. A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This does not certify that you can or should file for bankruptcy. Those are decisions that can only be made by you with the help of a licensed bankruptcy attorney.

Kristen L. Holt

President & Chief Executive Officer

Kuster L. Holt

GreenPath, Inc.

^{*} Individuals who wish to file for bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. § § 109(h) and 521(b).

| | Case 16-05024-5-JNC Doc 1 Filed 09/27/16 Entered 09/27/16 14:56:10 | Pag | e 10 of 69 |
|--------|--|------|---------------------------------|
| Fill | in this information to identify your case: | | |
| Deb | Anthony Wilson First Name Middle Name Last Name | | |
| | otor 2 Kristie Wilson Juse if, filing) First Name Middle Name Last Name | | |
| ` ` | red States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA | | |
| | e number | | |
| (if kn | | | ck if this is an nded filing |
| | | amo | naca ming |
| Off | ficial Form 106Sum | | |
| | mmary of Your Assets and Liabilities and Certain Statistical Information | | 12/15 |
| infor | s complete and accurate as possible. If two married people are filing together, both are equally responsible from the first of the firs | | |
| i aii | Outlinearize Four Assets | Vour | assets |
| | | | of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 56,300.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 5,720.96 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 62,020.96 |
| Part | 2: Summarize Your Liabilities | | |
| | | | liabilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 80,821.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 1,378.24 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$_ | 43,248.11 |
| | Your total liabilities | \$ | 125,447.35 |
| Part | 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 2,643.84 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 2,458.50 |
| Part | 4: Answer These Questions for Administrative and Statistical Records | | |

- 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?
 - □ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 - Yes
- 7. What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Debtor 1 Anthony Wilson
Debtor 2 Kristie Wilson
Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 750.78

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total | claim |
|--|-------|----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 1,378.24 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 3,934.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 5,312.24 |

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| | Case 10-0 | 03024-3 | SINC DUCT | 1 110 | ed 09/21/10 Entered 09/21/ | 10 14.50 | .10 F | ige 12 01 09 |
|-------------|--|---------------------------------------|--|-------------------------|--|----------------|----------------|--------------------------------------|
| Filli | n this informati | ion to identi | fy your case and th | nis filin | g: | | | |
| Debt | or 1 | Anthony N | √ilson | | | | | |
| 2001 | | First Name | | e Name | Last Name | | | |
| | _ | Kristie N | | | | | | |
| Spou | se, if filing) | First Name | Middle | e Name | Last Name | | | |
| Jnite | ed States Bankru | uptcy Court f | or the: EASTERN | DISTR | ICT OF NORTH CAROLINA | | | |
| Case | e number | | | | | | | ☐ Check if this is an amended filing |
| | | | | | | | | Ç |
|)ff | icial Form | <u>า 106A/</u> | <u>B</u> | | | | | |
| 3c | hedule | A/B: F | Property | | | | | 12/15 |
| ink forn | it fits best. Be as nation. If more sp er every question | s complete an pace is needed n. | d accurate as possib I, attach a separate s | le. If two heet to t | t only once. If an asset fits in more than one married people are filing together, both are his form. On the top of any additional pages | equally respo | nsible for su | oplying correct |
| Do | you own or have | any legal or | equitable interest in a | ny resid | dence, building, land, or similar property? | | | |
| | No. Go to Part 2. | | | | | | | |
| | Yes. Where is the | nronorty? | | | | | | |
| | | | | | | | | |
| .1 | | | | Wha | t is the property? Check all that apply | | | |
| | 56 Peanut | Drive | | | Single-family home | Do not deduc | ct secured cla | ims or exemptions. Put |
| | Street address, if ava | ailable, or other o | escription | _ | Duplex or multi-unit building | the amount of | of any secured | claims on Schedule D: |
| | | | | | Condominium or cooperative | Creditors Wr | no Have Claim | s Secured by Property. |
| | | | | | | | | |
| | | | 27870-000 | | Manufactured or mobile home | Current valu | e of the | Current value of the |
| | Roanoke Ra | pids NC | 0 | | Land | entire prope | | portion you own? |
| | City | State | ZIP Code | | Investment property | \$56 , | 300.00 | \$56,300.00 |
| | | | | | Timeshare | Describe the | e nature of yo | our ownership interest |
| | | | | | | (such as fee | simple, tena | ncy by the entireties, o |
| | | | | _ | has an interest in the property? Check one | a life estate) | , if known. | |
| | Halifax | | | | , | - | | |
| | | | | | | | | |
| | County | | | _ | · · · · · · · · · · · · · · · · · · · | | | munity property |
| | | | | | 7 IL TOUGH OTHE OF LITE GODIETO GITG GITGHTON | (see instr | , | |
| | | | | | r information you wish to add about this iten erty identification number: | n, such as loc | al | |
| | | | | Sin Pur | glewide Mobile home and 1/2 chased: 8/2007 | acre lar | ıd | |
| | | | | | chased Price: \$64,000.00 : 09-19247 | | | |
| | | | | | | | | |
| , , | Add the dollar v | value of the | nortion you own to | r all of | your entries from Part 1, including any | entries for | | |
| | | | | | er here | | > | \$56,300.00 |

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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| Debtor 1 Anthony Wilson Debtor 2 Kristie Wilson Case number (if known) | | | | Case number (if known) | |
|--|-------------------------------|--|--|--|---|
| . Cars, vans | , trucks, trac | tors, sport utility ve | hicles, motorcycles | | |
| □ No | | | | | |
| ■ Yes | | | | | |
| 3.1 Make: | Mitsubi Lancer | shi | Who has an interest in the property? Check one ☐ Debtor 1 only | the amount of any sec | d claims or exemptions. Put cured claims on Schedule D: Claims Secured by Property. |
| Model: Year: | 2005 | | Debtor 2 only | | , , |
| Approxii | mate mileage: | 140,000 | ■ Debtor 1 and Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| | formation: | | ☐ At least one of the debtors and another | | |
| VIN: | JA3AJ26E(| 05U034809 | Check if this is community property (see instructions) | \$1,954.00 | \$1,954.0 |
| Add the do | ollar value of have attach | f the portion you ow ed for Part 2. Write | rn for all of your entries from Part 2, including that number here | any entries for | \$1,954.00 |
| | | onal and Household It legal or equitable in | ems terest in any of the following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | | furnishings nces, furniture, linens | , china, kitchenware | | |
| | | Kitchen Appl | iances | | \$100.0 |
| | | | | | |
| | | Stove | | | \$150.0 |
| | | Refrigerator | | | \$75.0 |
| | | Freezer | | | \$75.0 |
| | | | | | |
| | | Dishes | | | \$25.0 |
| | | Washer | | | \$50.0 |
| | | Dryer | _ | | <u> </u> |
| | | Living room | furniture | | \$400.0 |
| | | | | · | |
| | | Bedroom Furn | iture | | \$400.0 |

Official Form 106A/B

Schedule A/B: Property

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| | y Wilson e Wilson Case no | umber (if known) | |
|--|---|----------------------------|---|
| | Dinning Room Furniture | | \$150.00 |
| | Lawn Mower | | \$200.00 |
| | Yard tools | | \$50.00 |
| | ons and radios; audio, video, stereo, and digital equipment; computers, printers, so g cell phones, cameras, media players, games | canners; music collectior | ns; electronic devices |
| | Televisions (3) | _ | \$375.00 |
| | VCR/DVD player | | \$250.00 |
| | Tapes, CD & DVD | | \$55.00 |
| | | | |
| Examples: Antiques other co | s and figurines; paintings, prints, or other artwork; books, pictures, or other art obje bllections, memorabilia, collectibles | ects; stamp, coin, or base | |
| Examples: Antiques other continues of the continues of th | s and figurines; paintings, prints, or other artwork; books, pictures, or other art objeollections, memorabilia, collectibles orts and hobbies photographic, exercise, and other hobby equipment; bicycles, pool tables, golf club instruments | | eball card collections; |
| Examples: Antiques other continues of the continue of the cont | s and figurines; paintings, prints, or other artwork; books, pictures, or other art objeollections, memorabilia, collectibles orts and hobbies photographic, exercise, and other hobby equipment; bicycles, pool tables, golf club instruments , rifles, shotguns, ammunition, and related equipment | | eball card collections; |
| Examples: Antiques other content of the content of | s and figurines; paintings, prints, or other artwork; books, pictures, or other art objeollections, memorabilia, collectibles brts and hobbies photographic, exercise, and other hobby equipment; bicycles, pool tables, golf club instruments day clothes, furs, leather coats, designer wear, shoes, accessories | | eball card collections; |
| Examples: Antiques other colored of the colored of | s and figurines; paintings, prints, or other artwork; books, pictures, or other art objeollections, memorabilia, collectibles brts and hobbies photographic, exercise, and other hobby equipment; bicycles, pool tables, golf club instruments day clothes, furs, leather coats, designer wear, shoes, accessories | | eball card collections; aks; carpentry tools; |
| other co No Yes. Describe 9. Equipment for spo Examples: Sports, musical No Yes. Describe 10. Firearms Examples: Pistols No Yes. Describe 11. Clothes Examples: Everyo No Yes. Describe 12. Jewelry | se and figurines; paintings, prints, or other artwork; books, pictures, or other art objeolections, memorabilia, collectibles | os, skis; canoes and kay | aks; carpentry tools; |

Examples: Dogs, cats, birds, horses

☐ No

Official Form 106A/B Schedule A/B: Property page 3

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| Debtor 1 Debtor 2 | Anthony W Kristie W | | | | Case number (if known) | |
|----------------------|---|-----------|--|--|----------------------------------|---|
| ■ Yes | . Describe | | | | | |
| | | Shitz | zu | | | \$100.00 |
| ■ No | other personal and . Give specific in | | | d not already list, including any he | alth aids you did not list | |
| | | | | Part 3, including any entries for pa | ages you have attached | \$3,705.00 |
| | escribe Your Final wn or have any | | | in any of the following? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ■ No | | | our wallet, in your l | home, in a safe deposit box, and on h | nand when you file your petitior | 1 |
| Exam | | | | counts; certificates of deposit; shares ats with the same institution, list each. Institution name: | | uses, and other similar |
| | | 17.1. | Savings | SECU | | \$25.13 |
| | | 17.2. | Savings | SECU | | \$36.83 |
| | | 17.3. | Cash Points Global | SECU | | \$0.00 |
| | | | cly traded stocks ent accounts with b | orokerage firms, money market accou | ints | |
| | ••••• | | Institution or issue | er name: | | |
| • | oublicly traded s venture | tock and | interests in incor | porated and unincorporated busin | esses, including an interest | in an LLC, partnership, and |
| | . Give specific in | | about themme of entity: | | % of ownership: | |
| Nego | tiable instrument | s include | personal checks, c | gotiable and non-negotiable instru ashiers' checks, promissory notes, ar transfer to someone by signing or del | nd money orders. | |
| ■ No □ Yes | . Give specific inf | | about them uer name: | | | |
| | ement or pension oples: Interests in | | | , 403(b), thrift savings accounts, or ot | her pension or profit-sharing pl | ans |
| | . List each accou | | tely. of account: | Institution name: | | |
| Official Fo | rm 106A/B | . ,,,, | | Schedule A/B: Property | | page 4 |

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| | ebtor 1 ebtor 2 | Anthor Kristi | | | | | Case number (i | if known) | |
|-----|--------------------|---------------------------|---------------|--------------------------------|--|-----------------------|---|--------------------|--|
| | | | | | | | _ | | |
| | Your sh | nare of all | unused o | | | | ce or use from a company water), telecommunications | companies, or o | thers |
| | | | | | Insti | itution name or inc | dividual: | | |
| 23. | _ | es (A con | tract for a | a periodic pay | ment of money to you, e | ither for life or for | a number of years) | | |
| | ■ No □ Yes | | Issu | er name and o | description. | | | | |
| | 26 U.S.C | | | IRA, in an ac 9A(b), and 52 | | BLE program, or | under a qualified state tui | ition program. | |
| | ■ No □ Yes | | Insti | tution name a | nd description. Separate | ely file the records | of any interests.11 U.S.C. § | § 521(c): | |
| 25. | Trusts, | equitable | or futu | e interests ir | n property (other than a | anything listed ir | ı line 1), and rights or pov | vers exercisable | e for your benefit |
| | ■ No | Givo spoo | sific infor | nation about t | hom | | | | |
| | | | | | | | | | |
| | | | | | e secrets, and other in esites, proceeds from roy | | | | |
| | _ | Give spec | cific infor | nation about t | hem | | | | |
| | Ехатр | | | | ral intangibles censes, cooperative ass | sociation holdings | , liquor licenses, profession | al licenses | |
| | ■ No □ Yes. | Give spec | cific inform | nation about t | hem | | | | |
| Mo | onev or r | property o | owed to | vou? | | | | Cu | rrent value of the |
| | ,, | , | | , | | | | po Do | rtion you own? not deduct secured ims or exemptions. |
| | Tax refo | unds owe | ed to you | I | | | | | |
| | | Give speci | ific inforn | nation about th | nem, including whether y | ou already filed th | ne returns and the tax years | S | |
| 29. | Family Examp | | due or lui | np sum alimo | ny, spousal support, chil | d support, mainte | nance, divorce settlement, | property settleme | ent |
| | ■ No | Give speci | ifia inform | ation | | | | | |
| | □ 1es. (| Sive speci | ilic illioiti | iatiori | | | | | |
| | Ехатр | les: Unpai | id wages | | urance payments, disabi nade to someone else | ility benefits, sick | pay, vacation pay, workers | compensation, | Social Security |
| | ■ No □ Yes. | Give spec | cific inform | nation | | | | | |
| | Ехатр | ts in insu les: Health | | | rance; health savings ac | count (HSA); cred | dit, homeowner's, or renter's | s insurance | |
| | ■ No □ Yes. N | Name the | insuranc | e company of | each policy and list its v | alue. | | | |
| | | | | Company | name: | | Beneficiary: | | urrender or refund alue: |
| | If you a | | neficiary | | ou from someone who t, expect proceeds from | | olicy, or are currently entitle | ed to receive prop | perty because |
| | ■ No □ Yes. | Give spec | cific inform | nation | | | | | |

Official Form 106A/B Schedule A/B: Property page 5

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| | otor 1 otor 2 | Anthony Kristie | | | | Case number (if known) | |
|------------|------------------|--------------------|--|---|--|-----------------------------|----------------|
| _ | Examp | | | er or not you have filed a | a lawsuit or made a dema or rights to sue | and for payment | |
| | ■ No □ Yes. | Describe eac | ch claim | | | | |
| | Other o | contingent ar | nd unliquidated o | claims of every nature, i | ncluding counterclaims o | of the debtor and rights to | set off claims |
| | Yes. | Describe eac | ch claim | | | | |
| | - | ancial assets | s you did not alre | eady list | | | |
| | No Vec | Give specific | information | | | | |
| _ | 1 103. | Oive specific | illioilliation | | | | |
| 36. | | | | | uding any entries for page | | \$61.96 |
| Part | 5: Des | scribe Any Bus | siness-Related Pro | perty You Own or Have an | Interest In. List any real esta | te in Part 1. | |
| 37. D | o you c | own or have ar | ny legal or equitable | e interest in any business- | related property? | | |
| | | to Part 6. | | | | | |
| | Yes. G | so to line 38. | | | | | |
| Part | If yo | ou own or have | an interest in farmla | and, list it in Part 1. | You Own or Have an Interes | | |
| | | Go to Part 7. | ,g | , | | g | |
| | ☐ Yes. | Go to line 47. | | | | | |
| Part | 7: | Describe All | Property You Own | or Have an Interest in Tha | t You Did Not List Above | | |
| _ | | | property of any k ickets, country clu | ind you did not already b membership | list? | | |
| | Yes. | Give specific | information | | | | |
| 54. | Add t | he dollar val | ue of all of your e | entries from Part 7. Writ | e that number here | | \$0.00 |
| Part | 8: | List the Totals | s of Each Part of th | is Form | | | |
| 55. | Part 1 | : Total real e | estate, line 2 | | | | \$56,300.00 |
| 56. | Part 2 | : Total vehic | les, line 5 | | \$1,954.00 | | |
| 57. | | - | | old items, line 15 | \$3,705.00 | | |
| 58. 59. | | | cial assets, line 3 ness-related prop | | \$61.96 \$0.00 | | |
| 60. | | | | ted property, line 52 | \$0.00 | | |
| 61. | | | property not list | | + \$0.00 | | |
| 62. | Total | personal pro | pperty. Add lines | 56 through 61 | \$5,720.96 | Copy personal property to | s5,720.96 |
| 63. | Total | of all proper | ty on Schedule A | VB . Add line 55 + line 62 | | | \$62,020.96 |

Official Form 106A/B Schedule A/B: Property page 6

| Fill in this inform | mation to identify your | case: | | | |
|---------------------|--------------------------|--------------------|------------------|--|------------------------------------|
| Debtor 1 | Anthony Wilson | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | EASTERN DISTRICT O | F NORTH CAROLINA | | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an amended filing |
| L | | | | | arrichaed ming |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | | | Specific laws that allow exemption | |
|--|-------------------------------------|---|------------------------------------|--|
| | Copy the value from Schedule A/B | Check only one box for each exemption. | | |
| Debtor 1 Exemptions Kitchen Appliances Line from Schedule A/B: 6.1 | \$100.00 | \$100.00 100% of fair market value, up to any applicable statutory limit | N.C. Gen. Stat. § 1C-1601(a)(4) | |
| Stove Line from Schedule A/B: 6.2 | \$150.00 | \$150.00 | N.C. Gen. Stat. § 1C-1601(a)(4) | |
| | | ☐ 100% of fair market value, up to any applicable statutory limit | | |
| Refrigerator Line from <i>Schedule A/B</i> : 6.3 | \$75.00 | \$75.00 | N.C. Gen. Stat. § 1C-1601(a)(4) | |
| | | ☐ 100% of fair market value, up to any applicable statutory limit | | |
| Freezer Line from <i>Schedule A/B</i> : 6.4 | \$75.00 | \$75.00 | N.C. Gen. Stat. § 1C-1601(a)(4) | |
| | | ☐ 100% of fair market value, up to any applicable statutory limit | | |
| Dishes Line from <i>Schedule A/B</i> : 6.5 | \$25.00 | \$25.00 | N.C. Gen. Stat. § 1C-1601(a)(4) | |
| | | ☐ 100% of fair market value, up to any applicable statutory limit | | |

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption |
|--|--|---|--------------------------------------|
| Washer | Schedule A/B \$50.00 | \$50.00 | N.C. Gen. Stat. \$ |
| Line from <i>Schedule A/B</i> : 6 . 6 | | 100% of fair market value, up to any applicable statutory limit | 1C-1601(a)(4) |
| Dryer Line from <i>Schedule A/B</i> : 6.7 | \$50.00 | \$50.00 | N.C. Gen. Stat. § 1C-1601(a)(4) |
| | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Living room furniture Line from Schedule A/B: 6.8 | \$400.00 | \$400.00 | N.C. Gen. Stat. § 1C-1601(a)(4) |
| | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Bedroom Furniture Line from Schedule A/B: 6.9 | \$400.00 | \$400.00 | N.C. Gen. Stat. § 1C-1601(a)(4) |
| | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Dinning Room Furniture Line from Schedule A/B: 6.10 | \$150.00 | \$150.00 | N.C. Gen. Stat. § 1C-1601(a)(4) |
| | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Lawn Mower Line from <i>Schedule A/B</i> : 6.11 | \$200.00 | \$200.00 | N.C. Gen. Stat. § 1C-1601(a)(4) |
| | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Yard tools Line from <i>Schedule A/B</i> : 6.12 | \$50.00 | \$50.00 | N.C. Gen. Stat. § _ 1C-1601(a)(4) |
| | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Televisions (3) Line from <i>Schedule A/B</i> : 7.1 | \$375.00 | \$375.00 | N.C. Gen. Stat. § _ 1C-1601(a)(4) |
| | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| VCR/DVD player Line from <i>Schedule A/B</i> : 7.2 | \$250.00 | \$250.00 | N.C. Gen. Stat. § _ 1C-1601(a)(4) |
| | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Tapes, CD & DVD Line from <i>Schedule A/B</i> : 7.3 | \$55.00 | \$55.00 | N.C. Gen. Stat. § 1C-1601(a)(4) |
| | | □ 100% of fair market value, up to any applicable statutory limit | |
| Computer Line from <i>Schedule A/B</i> : 7.4 | \$300.00 | \$300.00 | N.C. Gen. Stat. § 1C-1601(a)(4) |
| | | □ 100% of fair market value, up to any applicable statutory limit | |
| Shoes/Clothing Line from <i>Schedule A/B</i> : 11.1 | \$500.00 | \$500.00 | N.C. Gen. Stat. § _ 1C-1601(a)(4) |
| | | 100% of fair market value, up to any applicable statutory limit | |

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| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
|--|--------------------------------------|---|------------------------------------|
| | Copy the value from Schedule A/B | Check only one box for each exemption. | |
| Wedding set Line from Schedule A/B: 12.1 | \$400.00 | \$400.00 | N.C. Gen. Stat. § 1C-1601(a)(1) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| Shitzu Line from Schedule A/B: 13.1 | \$100.00 | \$100.00 | N.C. Gen. Stat. § 1C-1601(a)(2) |
| | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Savings: SECU Line from Schedule A/B: 17.1 | \$25.13 | \$25.13 | N.C. Gen. Stat. § 1C-1601(a)(2) |
| | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No | | | nt.) |
| ☐ Yes. Did you acquire the property cover☐ No | ed by the exemption wi | thin 1,215 days before you filed this case | ? |
| ☐ Yes | | | |

| Fil | l in this inforr | mation to identify your c | ase: | | |
|---------------------------|---|--|--|---|---|
| De | btor 1 | First Name | Middle Name | Last Name | |
| | btor 2 ouse if, filing) | Kristie Wilson First Name | Middle Name | Last Name | |
| Un | ited States Ba | nkruptcy Court for the: | EASTERN DISTRICT OF NO | ORTH CAROLINA | |
| | se number _ | | | | ☐ Check if this is an amended filing |
| Of | fficial Fo | rm 106C | | | |
| S | chedul | e C: The Pro | perty You Cla | nim as Exempt | 4/16 |
| the nee | property you li | isted on <i>Schedule A/B: Pi</i> d attach to this page as m | roperty (Official Form 106A/B) | as your source, list the property that y | e for supplying correct information. Using ou claim as exempt. If more space is ny additional pages, write your name and |
| any fun exe to t | r applicable s ds—may be ι mption to a p he applicable | tatutory limit. Some exe inlimited in dollar amou | mptions—such as those for nt. However, if you claim an and the value of the proper | health aids, rights to receive certain exemption of 100% of fair market v | being exempted up to the amount of n benefits, and tax-exempt retirement alue under a law that limits the unt, your exemption would be limited |
| 1. | Which set of | f exemptions are you cla | niming? Check one only, eve | n if your spouse is filing with you. | |
| | ■ You are cl | aiming state and federal r | nonbankruptcy exemptions. | 11 U.S.C. § 522(b)(3) | |
| | ☐ You are cl | aiming federal exemption | s. 11 U.S.C. § 522(b)(2) | | |
| 2. | For any prop | perty you list on Schedu | le A/B that you claim as exe | empt, fill in the information below. | |
| | | ion of the property and line that lists this property | on Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | | | Copy the value from Schedule A/B | Check only one box for each exemption. | |
| <u>De</u> | btor 2 Ex | | | | N.C. Con Stat S |
| | _ | hedule A/B: 17.2 | \$36.83 | \$36.83 | _ 1C-1601(a)(2) |
| | | | | ☐ 100% of fair market value, up to any applicable statutory limit | 0 |
| 3. | (Subject to ac | djustment on 4/01/19 and | , , | 5? ases filed on or after the date of adjustr | , |

☐ Yes

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Rev. 3/2016

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NORTH CAROLINA

| IN THE MA | TTER OF: |
|-----------|-----------|
| Anthony | Wilson |
| Kristie | Wilson |
| D | ebtor(s). |

CASE NUMBER:

| SCHEDULE C-1 - | PROPERTY CI | AIMED AS | SEXEMPT |
|----------------|-------------|----------|---------|

I, <u>Anthony Wilson</u>, claim the following property as exempt pursuant to 11 U.S.C. § 522 and the laws of the State of North Carolina, and nonbankruptcy Federal law: (Attach additional sheets if necessary).

1. NCGS 1C-1601(a)(1) (NC Const., Article X, Section 2) REAL OR PERSONAL PROPERTY USED AS A RESIDENCE OR BURIAL PLOT (The exemption is not to exceed \$35,000; however, an unmarried debtor who is 65 years of age or older is entitled to retain an aggregate interest in the property not to exceed \$60,000 in value so long as the property was previously owned by the debtor as a tenant by the entireties or as a joint tenant with rights of survivorship and the former co-owner of the property is deceased, in which case the debtor must specify his/her age and the name of the former co-owner, if a child use initials only, of the property below).

| Description of Property and Address | Market <u>Value</u> | Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint | Mortgage Holder or Lien Holder | Amount of Mortgage or Lien | Net <u>Value</u> | Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(1) |
|-------------------------------------|------------------------|---|---------------------------------------|----------------------------------|---------------------|---|
| Wedding set | 400.00 | J | Kay Jewelers/Sterl ing Jewelers | 521.00 | 0.00 | 400.00 |

| Debtor's Age: | |
|--------------------------|--|
| Name of former co-owner: | |
| | |

VALUE OF REAL ESTATE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(1): \$ 400.00

2. NCGS 1C-1601(a)(3) MOTOR VEHICLE (The exemption in one vehicle is not to exceed \$3,500).

| Model, Year Style of Auto | Market <u>Value</u> | Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint | Lien Holder | Amount of Lien | Net <u>Value</u> | Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(3) |
|------------------------------|------------------------|---|-------------|----------------|---------------------|---|
| -NONE- | | | | | | |

VALUE OF MOTOR VEHICLE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(3): \$ 0.00

3. NCGS 1C-1601(a)(4) (NC Const., Article X, Section 1) PERSONAL OR HOUSEHOLD GOODS (The debtor's aggregate interest is not to exceed \$5,000 plus \$1,000 for each dependent of the debtor, not to exceed \$4,000 total for dependents). The number of dependents for exemption purposes is 2 .

| Description of Property | Market <u>Value</u> | Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint | Lien <u>Holder</u> | Amount <u>of Lien</u> | Net <u>Value</u> | Claimed as Exempt Pursuant to NCGS 1C-1601(a)(4) |
|---------------------------|------------------------|---|-----------------------|--------------------------|---------------------|--|
| Bedroom | 400.00 | J | | | 400.00 | 400.00 |
| Furniture | | | | | | |
| Computer | 300.00 | J | | | 300.00 | 300.00 |
| Dinning Room Furniture | 150.00 | J | | | 150.00 | 150.00 |
| Dishes | 25.00 | J | | | 25.00 | 25.00 |
| Dryer | 50.00 | J | | | 50.00 | 50.00 |
| Freezer | 75.00 | J | | | 75.00 | 75.00 |
| Kitchen Appliances | 100.00 | J | | | 100.00 | 100.00 |
| Lawn Mower | 200.00 | J | | | 200.00 | 200.00 |
| Living room furniture | 400.00 | J | | | 400.00 | 400.00 |
| Refrigerator | 75.00 | J | | | 75.00 | 75.00 |
| Shoes/Clothing | 500.00 | J | | | 500.00 | 500.00 |
| Stove | 150.00 | J | | | 150.00 | 150.00 |
| Tapes, CD & DVD | 55.00 | J | | | 55.00 | 55.00 |
| Televisions (3) | 375.00 | J | | | 375.00 | 375.00 |
| VCR/DVD player | 250.00 | J | | | 250.00 | 250.00 |
| Washer | 50.00 | J | | | 50.00 | 50.00 |

Schedule C-1 - Property Claimed as Exempt - 3/2016

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| Description of Property | Market <u>Value</u> | Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint | Lien <u>Holder</u> | Amount of Lien | Net <u>Value</u> | Claimed as Exempt Pursuant to NCGS 1C-1601(a)(4) |
|-------------------------|------------------------|---|-----------------------|-------------------|---------------------|--|
| Yard tools | 50.00 | J | | | 50.00 | 50.00 |

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(4): \$ 3,205.00

4. NCGS 1C-1601(a)(5) TOOLS OF TRADE (The debtor's aggregate interest is not to exceed \$2,000 in value).

| Description | Market <u>Value</u> | Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint | Lien <u>Holder</u> | Amount of <u>Lien</u> | Net <u>Value</u> | Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(5) |
|-------------|------------------------|---|-----------------------|--------------------------|---------------------|---|
| -NONE- | | | | | | |

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(5): \$ 0.00

5. NCGS 1C-1601(a)(6) LIFE INSURANCE (NC Const., Article X, Section 5).

| Description\Insured\Last Four Digits of Policy Number\Beneficiary(if child, initials only) | Cash Value |
|--|---------------|
| -NONE- | |

6. NCGS 1C-1601(a)(7) PROFESSIONALLY PRESCRIBED HEALTH AIDS (For Debtor or Debtor's Dependents, no limit on value).

| Description | |
|-------------|--|
| -NONE- | |

7. NCGS 1C-1601(a)(8) COMPENSATION FOR PERSONAL INJURY, INCLUDING COMPENSATION FROM PRIVATE DISABILITY POLICIES OR ANNUITIES, OR COMPENSATION FOR DEATH OF A PERSON UPON WHOM THE DEBTOR WAS DEPENDENT FOR SUPPORT. COMPENSATION NOT EXEMPT FROM RELATED LEGAL, HEALTH OR FUNERAL EXPENSE.

Description AND Source of Compensation, Including Name (If child, initials only) & Last Four Digits of Account Number of any Disability Policy/Annuity

-NONE-

8. NCGS 1C-1601(a)(2) ANY PROPERTY (Debtor's aggregate interest in any property is not to exceed \$5,000 in value of any unused exemption amount to which the debtor is entitled under NCGS 1C-1601(a)(1)).

| Description of Property and Address | Market <u>Value</u> | Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint | Lien <u>Holder</u> | Amount <u>of Lien</u> | Net <u>Value</u> | Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(2) |
|-------------------------------------|------------------------|---|-----------------------|--------------------------|---------------------|---|
| Savings: SECU | 25.13 | D1 | | | 25.13 | 25.13 |
| Shitzu | 100.00 | J | | | 100.00 | 100.00 |

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(2): \$ 125.13

9. NCGS 1C-1601(a)(9) and 11 U.S.C. § 522 INDIVIDUAL RETIREMENT PLANS & RETIREMENT FUNDS, as defined in the Internal Revenue Code, and any plan treated in the same manner as an individual retirement plan, including individual retirement accounts and Roth retirement accounts as described in §§ 408(a) and 408A of the Internal Revenue Code, individual retirement annuities as described in § 408(b) of the Internal Revenue Code, accounts established as part of a trust described in § 408(c) of the Internal Revenue Code, and funds in an account exempt from taxation under § 401, 403, 408, 408A, 414, 457, or 510(a) of the Internal Revenue Code. For purposes of this subdivision, "Internal Revenue Code" means Code as defined in G.S. 105-228.90.

Type of Account\Location of Account\Last Four Digits of Account Number

-NONE-

10. NCGS 1C-1601(a)(10) FUNDS IN A COLLEGE SAVINGS PLAN, as qualified under § 529 of the Internal Revenue Code, and that are not otherwise excluded from the estate pursuant to 11 U.S.C. §§ 541(b)(5)-(6), (e), not to exceed a cumulative limit of \$25,000. If funds were placed in a college savings plan within the 12 months prior to filing, the contributions must have been made in the ordinary course of the debtor's financial affairs and must have been consistent with the debtor's past pattern of contributions. The exemption applies to funds for a child of the debtor that will actually be used for the child's college or university expenses.

| College Savings Plan\Last Four Digits of Account Number\Value\Initials of Child Beneficiary | |
|---|--|
| -NONE- | |

| 11. NCGS 1C-1601(a)(11) RETIREMENT BENEFITS UNDER THE RETIREMENT PLANS OF OTHER STATES AND GOVERNMENTAL |
|---|
| UNITS OF OTHER STATES (The debtor's interest is exempt only to the extent that these benefits are exempt under the laws of the state or |
| governmental unit under which the benefit plan is established). |

| Name of Retirement Plan\State Governmental Unit\Last Four Digits of Identifying Number | of Retirement Plan\State Governmental Unit\Last Four Digits of Identifying Number |
|--|---|
| -NONE- | <u> </u> |

12. NCGS 1C-1601(a)(12) ALIMONY, SUPPORT, SEPARATE MAINTENANCE, AND CHILD SUPPORT PAYMENTS OR FUNDS THAT HAVE BEEN RECEIVED OR TO WHICH THE DEBTOR IS ENTITLED (The debtor's interest is exempt to the extent the payments or funds are reasonably necessary for the support of the debtor or any dependent of the debtor).

| Type of Support\Amount\Location of Funds | |
|--|--|
| -NONE- | |

13. TENANCY BY THE ENTIRETY. The following property is claimed as exempt pursuant to 11 U.S.C. § 522 and the law of the State of North Carolina pertaining to property held as tenants by the entirety.

| Description of | Market | Lien | Amount | Net |
|----------------------|--------------|---------------|---------|--------------|
| Property and Address | <u>Value</u> | <u>Holder</u> | of Lien | <u>Value</u> |
| -NONE- | | | | |

VALUE CLAIMED AS EXEMPT: \$ 0.00

14. NORTH CAROLINA PENSION FUND EXEMPTIONS

| -NONE- | |
|--------|--|
| | |

15. OTHER EXEMPTIONS CLAIMED UNDER LAWS OF THE STATE OF NORTH CAROLINA

| NONE | |
|---------|--|
| I-NONE- | |

16. FEDERAL PENSION FUND EXEMPTIONS

|--|

17. OTHER EXEMPTIONS CLAIMED UNDER NONBANKRUPTCY FEDERAL LAW

| -NONE- | |
|--------|--|

18. RECENT PURCHASES

(a). List tangible personal property purchased by the debtor within ninety (90) days of the filing of the bankruptcy petition.

| Description | Market | Lien | Amount | Net |
|-------------|--------------|---------------|----------------|--------------|
| | <u>Value</u> | <u>Holder</u> | <u>of Lien</u> | <u>Value</u> |
| -NONE- | | | | |

(b). List any tangible personal property from 18(a) that is directly traceable to the liquidation or conversion of property that may be exempt and that was not acquired by transferring or using additional property.

| Description of Replacement Property | Description of Property Liquidated or Converted that May Be Exempt |
|-------------------------------------|--|
| | |

- 19. The debtor's property is subject to the following claims:
- a. Of the United States or its agencies as provided by federal law.
- b. Of the State of North Carolina or its subdivisions for taxes, appearance bonds or fiduciary bonds;
- c. Of a lien by a laborer for work done and performed for the person claiming the exemption, but only as to the specific property affected.
- d. Of a lien by a mechanic for work done on the premises, but only as to the specific property affected.
- e. For payment of obligations contracted for the purchase of specific real property affected.
- f. For contractual security interests in specific property affected; provided, that the exemptions shall apply to the debtor's household goods notwithstanding any contract for a nonpossessory, nonpurchase money security interest in any such goods.
- g. For statutory liens, on the specific property affected, other than judicial liens.
- h. For child support, alimony or distributive award order pursuant to Chapter 50 of the General Statutes of North Carolina.
- i. For criminal restitution orders docketed as civil judgments pursuant to G.S. 15A-1340.38.
- j. Debts of a kind specified in 11 U.S.C. § 523(a)(1) (certain taxes), (5) (domestic support obligations).
- k. Debts of a kind specified in 11 U.S.C. § 522(c).

| 2 | Nature of | Amount of | Description of | Value | Net |
|----------------------|-------------------|--------------|----------------------|-------------|--------------|
| Claimant | Claim | <u>Claim</u> | Property | of Property | <u>Value</u> |
| | | | 2005 Mitsubishi | | |
| Onemain | | | Lancer 140,000 miles | | |
| Financial/Citifinanc | | | VIN: | | |
| ial | on vehicle | 6,741.00 | JA3AJ26E05U034809 | 1,954.00 | 0.00 |
| | | | 56 Peanut Drive | | |
| | | | Roanoke Rapids, NC | | |
| | | | 27870 Halifax | | |
| | | | County | | |
| | | | Singlewide Mobile | | |
| | | | home and 1/2 acre | | |
| | | | land | | |
| | | | Purchased: 8/2007 | | |
| | | | Purchased Price: | | |
| | Agreement, Mortga | | \$64,000.00 | | |
| Ditech | ge | 73,559.00 | PIN: 09-19247 | 56,300.00 | 0.00 |

None of the property listed in paragraph 18(a), except qualified replacement property under 18(b), has been included in this claim of exemptions.

None of the claims listed in paragraph 19 is subject to this claim of exemptions.

I declare that to the extent any exemptions I have claimed appear on its face to exceed the amount allowed by the applicable statute, I claim only the maximum amount allowed by statute.

UNSWORN DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF INDIVIDUAL TO SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

| TO SCHEDULE | C-1 - PROPERTY CLAIMED AS EXEMPT |
|--|--|
| I, <u>Anthony Wilson</u> , declare unde Exempt, consisting of 8 sheets, and that they are true and corre | er penalty of perjury that I have read the foregoing Schedule C-1 - Property Claimed as ect to the best of my knowledge, information and belief. |
| Executed on: September 27, 2016 | /s/ Anthony Wilson |
| | Anthony Wilson Debtor |

Rev. 3/2016

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NORTH CAROLINA

| IN THE MATTER OF: | | | |
|-------------------|--|--|--|
| Anthony Wilson | | | |
| Kristie Wilson | | | |
| Debtor(s). | | | |
| | | | |

SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

- I, <u>Kristie Wilson</u>, claim the following property as exempt pursuant to 11 U.S.C. §522 and the laws of the State of North Carolina, and nonbankruptcy Federal law: (Attach additional sheets if necessary).
- 1. NCGS 1C-1601(a)(1) (NC Const., Article X, Section 2) REAL OR PERSONAL PROPERTY USED AS A RESIDENCE OR BURIAL PLOT (The exemption is not to exceed \$35,000; however, an unmarried debtor who is 65 years of age or older is entitled to retain an aggregate interest in the property not to exceed \$60,000 in value so long as the property was previously owned by the debtor as a tenant by the entireties or as a joint tenant with rights of survivorship and the former co-owner of the property is deceased, in which case the debtor must specify his/her age and the name of the former co-owner, if a child use initials only, of the property below).

| Description of Property and Address | Market <u>Value</u> | Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint | Mortgage Holder or Lien Holder | Amount of Mortgage or Lien | Net <u>Value</u> | |
|-------------------------------------|------------------------|---|-----------------------------------|----------------------------------|---------------------|--|
| -NONE- | | | | | | |
| Debtor's Age: | | | | | | |
| Name of former co-owner | er: | | | | | |

VALUE OF REAL ESTATE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(1): \$ 0.00

CASE NUMBER:

2. NCGS 1C-1601(a)(3) MOTOR VEHICLE (The exemption in one vehicle is not to exceed \$3,500).

| | | Owner | | | | |
|------------------------------|------------------------|--|--------------------|--------------------------|---------------------|---|
| Model, Year Style of Auto | Market <u>Value</u> | (D1)Debtor 1 (D2)Debtor 2 (J)Joint | <u>Lien Holder</u> | Amount of <u>Lien</u> | Net <u>Value</u> | Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(3) |
| -NONE- | | | | | | |

VALUE OF MOTOR VEHICLE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(3): \$ 0.00

3. NCGS 1C-1601(a)(4) (NC Const., Article X, Section 1) PERSONAL OR HOUSEHOLD GOODS (The debtor's aggregate interest is not to exceed \$5,000 plus \$1,000 for each dependent of the debtor, not to exceed \$4,000 total for dependents). The number of dependents for exemption purposes is ___2__.

| Description of Property | Market <u>Value</u> | Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint | Lien <u>Holder</u> | Amount of Lien | Net <u>Value</u> | Claimed as Exempt Pursuant to NCGS 1C-1601(a)(4) |
|-------------------------|------------------------|---|-----------------------|-------------------|---------------------|--|
| -NONE- | | | | | | |

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(4): \$ 0.00

4. NCGS 1C-1601(a)(5) TOOLS OF TRADE (The debtor's aggregate interest is not to exceed \$2,000 in value).

| Description | Market | Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint | Lien Holder | Amount of <u>Lien</u> | Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(5) |
|-------------|--------|---|----------------|-----------------------|---|
| -NONE- | | | | | |

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(5): \$ 0.00

5. NCGS 1C-1601(a)(6) LIFE INSURANCE (NC Const., Article X, Section 5).

| Description\Insured\Last Four Digits of Policy Number\Beneficiary(if child, initials only) | Cash Value |
|--|---------------|
| -NONE- | |

6. NCGS 1C-1601(a)(7) PROFESSIONALLY PRESCRIBED HEALTH AIDS (For Debtor or Debtor's Dependents, no limit on value).

| Description | |
|-------------|--|
| -NONE- | |

7. NCGS 1C-1601(a)(8) COMPENSATION FOR PERSONAL INJURY, INCLUDING COMPENSATION FROM PRIVATE DISABILITY POLICIES OR ANNUITIES, OR COMPENSATION FOR DEATH OF A PERSON UPON WHOM THE DEBTOR WAS DEPENDENT FOR SUPPORT. COMPENSATION NOT EXEMPT FROM RELATED LEGAL, HEALTH OR FUNERAL EXPENSE.

Description AND Source of Compensation, Including
Name (If child, initials only) & Last Four Digits of Account Number of any Disability Policy/Annuity

-NONE-

8. NCGS 1C-1601(a)(2) ANY PROPERTY (Debtor's aggregate interest in any property is not to exceed \$5,000 in value of any unused exemption amount to which the debtor is entitled under NCGS 1C-1601(a)(1)).

| Description of Property and Address | Market <u>Value</u> | Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint | Lien <u>Holder</u> | Amount <u>of Lien</u> | Net <u>Value</u> | Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(2) |
|-------------------------------------|------------------------|---|-----------------------|--------------------------|---------------------|---|
| Savings: SECU | 36.83 | D2 | | | 36.83 | 36.83 |

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(2): \$ 36.83

9. NCGS 1C-1601(a)(9) and 11 U.S.C. § 522 INDIVIDUAL RETIREMENT PLANS & RETIREMENT FUNDS, as defined in the Internal Revenue Code, and any plan treated in the same manner as an individual retirement plan, including individual retirement accounts and Roth retirement accounts as described in §§ 408(a) and 408A of the Internal Revenue Code, individual retirement annuities as described in § 408(b) of the Internal Revenue Code, accounts established as part of a trust described in § 408(c) of the Internal Revenue Code, and funds in an account exempt from taxation under § 401, 403, 408, 408A, 414, 457, or 510(a) of the Internal Revenue Code. For purposes of this subdivision, "Internal Revenue Code" means Code as defined in G.S. 105-228.90.

Type of Account\Location of Account\Last Four Digits of Account Number

-NONE-

10. NCGS 1C-1601(a)(10) FUNDS IN A COLLEGE SAVINGS PLAN, as qualified under § 529 of the Internal Revenue Code, and that are not otherwise excluded from the estate pursuant to 11 U.S.C. §§ 541(b)(5)-(6), (e), not to exceed a cumulative limit of \$25,000. If funds were placed in a college savings plan within the 12 months prior to filing, the contributions must have been made in the ordinary course of the debtor's financial affairs and must have been consistent with the debtor's past pattern of contributions. The exemption applies to funds for a child of the debtor that will actually be used for the child's college or university expenses.

College Savings Plan\Last Four Digits of Account Number\Value\Initials of Child Beneficiary

-NONE-

11. NCGS 1C-1601(a)(11) RETIREMENT BENEFITS UNDER THE RETIREMENT PLANS OF OTHER STATES AND GOVERNMENTAL UNITS OF OTHER STATES (The debtor's interest is exempt only to the extent that these benefits are exempt under the laws of the state or governmental unit under which the benefit plan is established).

Name of Retirement Plan\State Governmental Unit\Last Four Digits of Identifying Number

-NONE-

12. NCGS 1C-1601(a)(12) ALIMONY, SUPPORT, SEPARATE MAINTENANCE, AND CHILD SUPPORT PAYMENTS OR FUNDS THAT HAVE BEEN RECEIVED OR TO WHICH THE DEBTOR IS ENTITLED (The debtor's interest is exempt to the extent the payments or funds are reasonably necessary for the support of the debtor or any dependent of the debtor).

Type of Support\Amount\Location of Funds

-NONE-

13. TENANCY BY THE ENTIRETY. The following property is claimed as exempt pursuant to 11 U.S.C. § 522 and the law of the State of North Carolina pertaining to property held as tenants by the entirety.

| Description of | Market | Lien | Amount | Net |
|----------------------|--------------|---------------|----------------|--------------|
| Property and Address | <u>Value</u> | <u>Holder</u> | <u>of Lien</u> | <u>Value</u> |
| -NONE- | | | | |

VALUE CLAIMED AS EXEMPT: \$ 0.00

| 1/ | NORTH CAROLINA | DENISION FLIND | EXEMPTIONS |
|-----|----------------|----------------|------------|
| 14. | | PENSION FUNIS | |

| -NONE- | |
|--|--|
| 15. OTHER EXEMPTIONS CLAIMED UNDER LAWS OF THE STATE OF NORTH CAROLINA | |
| -NONE- | |
| 16. FEDERAL PENSION FUND EXEMPTIONS | |
| -NONE- | |
| 17. OTHER EXEMPTIONS CLAIMED UNDER NONBANKRUPTCY FEDERAL LAW | |
| -NONE- | |

18. RECENT PURCHASES

(a). List tangible personal property purchased by the debtor within ninety (90) days of the filing of the bankruptcy petition.

| Description | Market | Lien | Amount | Net |
|-------------|--------------|---------------|---------|--------------|
| | <u>Value</u> | <u>Holder</u> | of Lien | <u>Value</u> |
| -NONE- | | | | |

(b). List any tangible personal property from 18(a) that is directly traceable to the liquidation or conversion of property that may be exempt and that was not acquired by transferring or using additional property.

| Description of Replacement Property | Description of Property Liquidated or Converted that May Be Exempt |
|-------------------------------------|--|
| | |

- 19. The debtor's property is subject to the following claims:
- a. Of the United States or its agencies as provided by federal law.
- b. Of the State of North Carolina or its subdivisions for taxes, appearance bonds or fiduciary bonds;
- c. Of a lien by a laborer for work done and performed for the person claiming the exemption, but only as to the specific property affected.
- d. Of a lien by a mechanic for work done on the premises, but only as to the specific property affected.
- e. For payment of obligations contracted for the purchase of specific real property affected.
- f. For contractual security interests in specific property affected; provided, that the exemptions shall apply to the debtor's household goods notwithstanding any contract for a nonpossessory, nonpurchase money security interest in any such goods.
- g. For statutory liens, on the specific property affected, other than judicial liens.
- h. For child support, alimony or distributive award order pursuant to Chapter 50 of the General Statutes of North Carolina.
- i. For criminal restitution orders docketed as civil judgments pursuant to G.S. 15A-1340.38.
- j. Debts of a kind specified in 11 U.S.C. § 523(a)(1) (certain taxes), (5) (domestic support obligations).
- k. Debts of a kind specified in 11 U.S.C. § 522(c).

| | Nature of | Amount of | Description of | Value | Net |
|----------|--------------|--------------|----------------|-------------|--------------|
| Claimant | <u>Claim</u> | <u>Claim</u> | Property | of Property | <u>Value</u> |
| -NONE- | | | | | |

None of the property listed in paragraph 18(a), except qualified replacement property under 18(b), has been included in this claim of exemptions.

None of the claims listed in paragraph 19 is subject to this claim of exemptions.

I declare that to the extent any exemptions I have claimed appear on its face to exceed the amount allowed by the applicable statute, I claim only the maximum amount allowed by statute.

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UNSWORN DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF INDIVIDUAL TO SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

| I, <u>Kristie Wilson</u> , declare under penalty of perjury that I have read the foregoing Schedule C-1 - Property Claimed as Exempt, consisting of 8 sheets, and that they are true and correct to the best of my knowledge, information and belief. | | | | | |
|---|------------------------|--|--|--|--|
| Executed on: September 27, 2016 | /s/ Kristie Wilson | | | | |
| | Kristie Wilson Debtor | | | | |

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| Debtor 1 | | | | • | |
|---|---|---|-----------------------------------|--|---------------------|
| Debtor 2 Kristia Vilson Middle Name Lee Name | Fill in this information to identify y | our case: | | | |
| Geouge I, limited States Bankruptory Court for the: EASTERN DISTRICT OF NORTH CARQLINA | Debtor 1 Anthony Wil | son | | _ | |
| United States Bankruptcy Court for the: Case number | | son | | _ | |
| Case number (# known) Check if this is an amended filing | (Spouse if, filing) First Name | Middle Name Last Name | | | |
| Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and secureties a possible. If we married people are filing tegether, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it to out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? 1. Do any creditors have claims secured by your property? 1. Do any creditors have claims secured by your property? 1. Do any creditors have claims secured by your property? 1. Do any creditors have claims secured by your property? 1. Do any creditors have claims secured by your property? 1. Do any creditors have claims secured by your property? 1. Do any creditors have claims secured by your property? 1. Do any creditors have claims secured by your property? 1. Do any creditors have claims secured by your property? 1. Do any creditors have claims secured by your property? 1. Do any creditors have claims secured by your property? 1. Do any creditors have claims secured by your property? 1. Do any creditors have claims secured by your property? 1. Do any creditors have claims secured by your property? 1. Do any creditors have claims secured by your property? 1. Do any creditors have claims secured by your property? 1. Do any creditors have claims secured by your property? 1. Describe the property that secures the claim: 1. So any creditor have claims secured by your property that secures the claim: 1. So any creditor have claims secured by your property that secures the claims: 1. So any creditor have claims secured by your property that secures the claims: 1. So any creditor have claims secured by your property have considered by your property have creditors among your property have considered by your property have p | United States Bankruptcy Court for th | e: EASTERN DISTRICT OF NORTH CAROLINA | 4 | _ | |
| Schedule D: Creditors Who Have Claims Secured by Property 12/15 Bo as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 10 pay or enditors have claims secured by your property? 10 No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. 10 Yes, Fill in all of the information below. 10 The List All Secured Claims. 10 The Claims of the information below. 10 The List All Secured Claims are resident has more than one secured daim, list the creditor separately for each claim. If more than one creditor has a particular claim, first the other greditors in Fart 2. As a few or collaboration are property of the security of name. 10 Debugged the Claims of the Claim | | | | _ | |
| Schedule D: Creditors Who Have Claims Secured by Property 12/15 Bo as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 10 pay or enditors have claims secured by your property? 10 No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. 10 Yes, Fill in all of the information below. 10 The List All Secured Claims. 10 The Claims of the information below. 10 The List All Secured Claims are resident has more than one secured daim, list the creditor separately for each claim. If more than one creditor has a particular claim, first the other greditors in Fart 2. As a few or collaboration are property of the security of name. 10 Debugged the Claims of the Claim | Official Form 106D | | | | |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number of known, number of known. 1. Oo any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes, Fill in all of the information below. | | s Who Have Claims Secured | l by Propert | ·v | 12/15 |
| No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part Elst All Secured Claims Column B Column B | Be as complete and accurate as possible is needed, copy the Additional Page, fill | e. If two married people are filing together, both are equ | ually responsible for s | upplying correct informa | tion. If more space |
| Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately or each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. 2.1 Ditech Creditor's Name Describe the property that secures the claim: 56 Peanut Drive Roanoke Rapids, NC 27870 Halifax County Single-wide Mobile home and 1/2 acre land Purchased Price: \$64,000.00 Pin: 09-19247 As of the date you file, the claim is: Check all that apply. Debtor 1 only Debtor 2 only At least one of the debtors and another Connumity debt Connumity debt Describe the claim is: Check all that apply. At least one of the debtors and another Check it in claim relates to a community debt Describe the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. At least one of the debtors and another Check it in claim relates to a community debt Date debt was incurred 1/02/16 Last 4 digits of account number 1196 22.2 Kay Jawelers/Sterling Jawelers/Sterling Jawelers/Sterling Akron, OH 44309-1799 Akron, OH 44309-1799 Number, Street, City, State & Zp Code As of the date you file, the claim is: Check all that apply. Condingent Wedding set As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. Contingent Wedding set As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. Contingent Uniquidated Disputed | Do any creditors have claims secured | by your property? | | | |
| Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one reditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. 2.1 Ditech Creditor's Name Describe the property that secures the claim: 5 F Pean ut Drive Roanoke Rapids, NC 27870 Halifax County Singlewide Mobile home and 1/2 acre land Purchased Price: \$64,000.00 PIN: 09-19247 As part ded taby our file, the claim is: Check all that apply. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At season of the debtors and another Check if this claim relates to a community debt Community debt Date debt was incurred 1/02/16 Date debt was incurred 1/02/16 Describe the property that secures the claim: S F Pean ut Drive Roanoke Rapids, NC 27870 Halifax County Singlewide Mobile home and 1/2 acre land Purchased Price: \$64,000.00 PIN: 09-19247 As of the date you file, the claim is: Check all that apply. An agreement you made (such as mortgage or secured colon) Debtor 1 and Debtor 2 only A least one of the debtors and another Check if this claim relates to a community debt Comen do 8/07 Last Active Date debt was incurred 1/02/16 Date (Including a right to offset) Describe the property that secures the claim: Xey Describe the property that secures the claim: Xey Active Date debt was incurred 1/02/16 Describe the property that secures the claim: Xey Active Date (Including a right to offset) Describe the property that secures the claim: Xey Active Date (Including a right to offset) Mortgage Describe the property that secures the claim: Xey Country Active Date (Including a right to offset) Mortgage Describe the property that secures the claim is: Check all that apply active a | ☐ No. Check this box and submi | t this form to the court with your other schedules. Yo | ou have nothing else | to report on this form. | |
| 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has particular claim, list the driber creditors in Part 2. As mount of claim bon of deduct the value of collateral that supports this claim. 2.1 Ditech Creditor's Name Describe the property that secures the claim: 56 Peanut Drive Roanoke Rapiday, NC 27870 Halifax County Singlewide Mobile home and 1/2 acre land Purchased: 8/2007 Purchased: 8/2007 Purchased: 8/2007 Purchased: 8/2007 Purchased: 8/2007 Purchased: Price: \$64,000.00 PIN: 99-19247 As of the date you file, the claim is: Check all that apply. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 and Debtor 3 and 2 community debt Opened 08/07 Last Active Date debt was incurred 1/02/16 Active Date debt was incurred 1/02/16 Describe the property that secures the claim: \$521.00 \$400.00 \$121.00 Statutory lien (such as tax lien, mechanic's lien) Syapped S | Yes. Fill in all of the information | n below. | | | |
| 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. 2.1 Ditech Cireditor's Name Secrib the property that secures the claim: Value of collateral those deduct the value of collateral that supports this claim. Secrib the property that secures the claim: Value of collateral that supports this claim. Secrib the property that secures the claim: Value of collateral that supports this claim. Secrib the property that secures the claim: Value of collateral that supports this claim. Value of collateral that supports this claim. Secrib the property that secures the claim: Value of collateral that supports this claim. Secrib the supports that secures the claim: Value of collateral that supports this claim. Value of collateral that supports that secures the claim: Value of collateral that supports that secures the claim: Value of collateral that supports that supports that secures the claim: Value of collateral that supports that secures the claim: Value of collateral that supports that secures the claim: Value of collateral that supports that secures the claim: Value of collateral that supports tha | Part 1: List All Secured Claims | | Caluman A | Caluman D | Caluma C |
| Ditech Creditor's Name Secribe the property that secures the claim: \$73,559.00 \$56,300.00 \$17,259.00 | for each claim. If more than one creditor h | as a particular claim, list the other creditors in Part 2. As | Amount of claim Do not deduct the | Value of collateral that supports this | Unsecured portion |
| Rapids, NC 27870 Halifax County Singlewide Mobile home and 1/2 acre land Purchased: 8/2007 Purchased Price: \$64,000.00 Plurchased Pr | 2.1 Ditech | Describe the property that secures the claim: | | | • |
| Attn: Bankruptcy Po Box 6172 Rapid City, SD 57709 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Opened 08/07 Last Active Date debt was incurred 1/02/16 East 4 digits of account number East 4 digits of account number Describe the property that secures the claim: Scheck all that apply. Mortgage Describe the property that secures the claim: \$521.00\$ \$400.00\$ \$121.00\$ Square As of the date you file, the claim is: Check all that apply. I contingent Uniliquidated Disputed Describe the property that secures the claim: Span 1799 Akron, OH 44309-1799 Number, Street, City, State & Zip Code Disputed | Creditor's Name | Rapids, NC 27870 Halifax County Singlewide Mobile home and 1/2 acre land Purchased: 8/2007 Purchased Price: \$64,000.00 | | | |
| Number, Street, City, State & Zip Code Disputed D | Po Box 6172 | As of the date you file, the claim is: Check all that apply. | | | |
| Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Debtor 2 only Opened 08 / 07 Last Active Date debt was incurred 1/02/16 East 4 digits of account number Po Box 1799 Akron, OH 44309-1799 Number, Street, City, State & Zip Code Disputed Nature of lien, Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Dudgment lien from a lawsuit Other (including a right to offset) Mortgage Mortgage Mortgage Describe the property that secures the claim: \$521.00 \$400.00 \$121.00 | | <u> </u> | | | |
| □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt □ Opened □ 08 / 07 □ Last □ Active □ Active □ 1/02/16 □ Last 4 digits of account number □ Creditor's Name □ PO Box 1799 □ Akron, OH 44309-1799 □ Number, Street, City, State & Zip Code □ Debtor 1 and Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a | | ☐ Disputed | | | |
| □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt □ Opened ○ 88/07 □ Last Active □ Jewelers/Sterling Jewelers □ Creditor's Name □ Ober including a right to offset) □ Describe the property that secures the claim: □ Ober including set □ Describe the property that secures the claim: □ Ober including set □ Opened ○ 88/07 □ Last 4 digits of account number □ 1196 □ Describe the property that secures the claim: □ Ober including a right to offset) □ Jewelers Security □ Describe the property that secures the claim: □ Ober including a right to offset) □ Describe the property that secures the claim: □ Ober including a right to offset) □ Describe the property that secures the claim: □ Ober including a right to offset) □ Describe the property that secures the claim: □ Ober including a right to offset) □ Describe the property that secures the claim: □ Ober including a right to offset) □ Describe the property that secures the claim: □ Ober including a right to offset) □ Describe the property that secures the claim: □ Ober including a right to offset) □ Describe the property that secures the claim: □ Ober including a right to offset) □ Describe the property that secures the claim: □ Ober including a right to offset) □ Describe the property that secures the claim: □ Describe the property that secures the claim: □ Ober including a right to offset) □ Describe the property that secures the claim: □ Describe the property | _ | _ | | | |
| At least one of the debtors and another Check if this claim relates to a community debt Opened | | | urea | | |
| Check if this claim relates to a community debt Opened 08/07 Last Active 1/02/16 Date debt was incurred 1/02/16 Last 4 digits of account number 1196 Last 4 digits of account number 1196 Last 4 digits of account number 1196 Describe the property that secures the claim: \$521.00 \$400.00 \$121.00 PO Box 1799 Akron, OH 44309-1799 Number, Street, City, State & Zip Code Number, Street, City, State & Zip Code Disputed | ■ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| Community debt Opened | | _ | | | |
| Opened 08/07 Last Active 1/02/16 Last 4 digits of account number 1196 2.2 Kay Jewelers/Sterling Jewelers Creditor's Name Describe the property that secures the claim: \$521.00 \$400.00 \$121.00 Wedding set As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed | | Other (including a right to offset) Mortgage | | | |
| Z.2 Jewelers/Sterling Jewelers Describe the property that secures the claim: \$521.00 \$400.00 \$121.00 | Opened 08/07 Last Active | Last 4 digits of account number 1196 | | | |
| Z.2 Jewelers/Sterling Jewelers Describe the property that secures the claim: \$521.00 \$400.00 \$121.00 | | | | | |
| As of the date you file, the claim is: Check all that apply. Akron, OH 44309-1799 Number, Street, City, State & Zip Code As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed | 2.2 Jewelers/Sterling | Describe the property that secures the claim: | \$521.00 | \$400.00 | \$121.00 |
| PO Box 1799 Akron, OH 44309-1799 Number, Street, City, State & Zip Code □ Disputed | Creditor's Name | Wedding set | _ | _ | |
| ☐ Disputed | Akron, OH 44309-1799 | apply. ☐ Contingent | | | |
| | | ☐ Disputed | | | |

Official Form 106D

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| Debtor 1 Anthony Wilson | | Case number (if know) | | |
|--|--|--|-----------------------|--|
| First Name Middle No | ame Last Name | _ | | |
| Debtor 2 Kristie Wilson First Name Middle Na | ame Last Name | | | |
| | | | | |
| ■ Debtor 1 only □ Debtor 2 only | An agreement you made (such as mort car loan) | gage or secured | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechan | ic's lien) | | |
| At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | | | |
| Date debt was incurred 0pened 10/15 | Last 4 digits of account number | 9759 | | |
| Onemain 2.3 Financial/Citifinanc | | | | |
| 2.3 Financial/Citifinanc ial | Describe the property that secures the o | slaim: \$6,741.00 | \$1,954.00 \$4,787.00 | |
| Creditor's Name | 2005 Mitsubishi Lancer | | | |
| | 140,000 miles VIN: JA3AJ26E05U034809 | | | |
| 6801 Colwell Blvd Ntsb-2320 | As of the date you file, the claim is: Chec | k all that | | |
| Irving, TX 75039 | apply. Contingent | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | |
| | ☐ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| ☐ Debtor 1 only ☐ Debtor 2 only | An agreement you made (such as mort car loan) | gage or secured | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechan | ic's lien) | | |
| At least one of the debtors and another | Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | en on vehicle | | |
| Opened 06/15 Last Active 8/19/16 | Last 4 digits of account number | 0442 | | |
| | | | | |
| Add the dollar value of your entries in C | olumn A on this page. Write that number | here: \$80,821.00 | 7 | |
| If this is the last page of your form, add | · - | \$80,821.00 | | |
| Write that number here: | | 400,022.00 | | |
| Part 2: List Others to Be Notified fo | r a Debt That You Already Listed | | | |
| Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. | | | | |
| Name, Number, Street, City, State & 2 Portfolio Recovery Ass | The state of the s | On which line in Part 1 did you enter th | | |
| P.O. Box 12903 Norfolk, VA 23541 | | Last 4 digits of account number | - | |
| Name, Number, Street, City, State & 2 Shapiro and Ingle | Zip Code | On which line in Part 1 did you enter th | ne creditor?2.1 | |
| 10130 Perimeter Parywa Charlotte, NC 28216 | y, Suite 400 | Last 4 digits of account number | - | |

Official Form 106D

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| | Case 10-03024-3-3 | NC DUC | 1 1 lieu 03/21/10 Li | ilereu o | 3/2//10 14.5 | 0.10 Fage | 32 01 03 |
|---------|---|---|--|---------------|-------------------------|----------------------|--------------------|
| Filli | in this information to identify | your case: | | | | | |
| Deb | • | | | | | | |
| | First Name | | dle Name Last Nan | ne | | | |
| | tor 2 Kristie Wi | | | | | | |
| (Spot | use if, filing) First Name | Mid | dle Name Last Nan | ne | | | |
| Unit | ed States Bankruptcy Court for | the: EASTE | RN DISTRICT OF NORTH CAR | OLINA | | | |
| Cas | e number | | | | | | |
| (if kno | own) | | | | | ☐ Check | if this is an |
| | | | | | | amend | ed filing |
| ∩ffi | icial Form 106E/F | | | | | | |
| | | s Wha Ha | va Unassurad Claim | | | | 12/15 |
| | | | ve Unsecured Claim | | | | |
| eft. A | | | operty. If more space is needed, cave no information to report in a P | | | | |
| Part | List All of Your PRIORI | TY Unsecured | Claims | | | | |
| 1. | Do any creditors have priority uns | secured claims a | gainst you? | | | | |
| | ☐ No. Go to Part 2. | | | | | | |
| | Yes. | | | | | | |
| i I | identify what type of claim it is. If a cl | aim has both prio al order according | or has more than one priority unsecutive and nonpriority amounts, list that to the creditor's name. If you have rem, list the other creditors in Part 3. | claim here ar | nd show both priority a | nd nonpriority amoun | ts. As much as |
| (| (For an explanation of each type of c | claim, see the inst | ructions for this form in the instruction | n booklet.) | | | |
| | | | | | Total claim | Priority amount | Nonpriority amount |
| 2.1 | HALIFAX COUNTY TAX | DEPT | Last 4 digits of account number | | \$778.24 | \$778.24 | \$0.00 |
| | Priority Creditor's Name ATTN: BANKRUPTCY D PO BOX 68 | EPT | When was the debt incurred? | 2016 | | | |
| | Halifax, NC 27839 | | | | | | |
| | Number Street City State Zlp C | | As of the date you file, the clain | is: Check a | II that apply | | |
| | Who incurred the debt? Check or | ne. | ☐ Contingent | | | | |
| | ☐ Debtor 1 only | | ☐ Unliquidated | | | | |
| | ☐ Debtor 2 only | | ☐ Disputed | | | | |
| | ■ Debtor 1 and Debtor 2 only | | Type of PRIORITY unsecured cl | aim: | | | |
| | ☐ At least one of the debtors and | another | ☐ Domestic support obligations | | | | |
| | ☐ Check if this claim is for a co | mmunity debt | ■ Taxes and certain other debts | you owe the | government | | |
| | Is the claim subject to offset? | • | ☐ Claims for death or personal in | • | • | | |
| | No | | Other. Specify | | | | |
| | ☐ Yes | | Taxes | | | | |

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| Debtor 1 Anthony Wilson Debtor 2 Kristie Wilson | Case num | ber (if know) | | |
|---|---|---------------------------|-------------------------|---------------|
| 2.2 Internal Revenue Service Priority Creditor's Name P.O. Box 7346 Philadelphia, PA 19101-7346 | Last 4 digits of account number When was the debt incurred? | \$0.00 | \$0.00 | \$0.00 |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all tha | at apply | | |
| Who incurred the debt? Check one. | ☐ Contingent | | | |
| ☐ Debtor 1 only | ☐ Unliquidated | | | |
| ☐ Debtor 2 only | ☐ Disputed | | | |
| ■ Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured claim: | | | |
| ☐ At least one of the debtors and another | ☐ Domestic support obligations | | | |
| ☐ Check if this claim is for a community debt | ☐ Claims for death or personal injury while you we | re intoxicated | | |
| ■ No □ Yes | Other. Specify | | | |
| N.C. Dept. of Revenue | Last 4 digits of account number | \$600.00 | \$600.00 | \$0.00 |
| Priority Creditor's Name Attn: Bkr. Unit P.O. Box 1168 Raleigh, NC 27640-1168 | When was the debt incurred? 12/31/201 | 15 | | |
| Number Street City State ZIp Code | As of the date you file, the claim is: Check all tha | at apply | | |
| Who incurred the debt? Check one. | ☐ Contingent | | | |
| ☐ Debtor 1 only | ☐ Unliquidated | | | |
| ☐ Debtor 2 only | ☐ Disputed | | | |
| ■ Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured claim: | | | |
| ☐ At least one of the debtors and another | ☐ Domestic support obligations | | | |
| ☐ Check if this claim is for a community debt | ■ Taxes and certain other debts you owe the gove | ernment | | |
| Is the claim subject to offset? | Claims for death or personal injury while you we | re intoxicated | | |
| ■ No | Other. Specify | | | |
| Yes | Taxes | | | |
| Part 2: List All of Your NONPRIORITY Unse | cured Claims | | | |
| 3. Do any creditors have nonpriority unsecured cla | ims against you? | | | |
| ☐ No. You have nothing to report in this part. Subr | nit this form to the court with your other schedules. | | | |
| Yes. | | | | |
| unsecured claim, list the creditor separately for each | he alphabetical order of the creditor who holds each a claim. For each claim listed, identify what type of claim her creditors in Part 3.If you have more than three nonpri | it is. Do not list claims | already included in Par | rt 1. If more |

Total claim

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| | or1 Anthony Wilson or2 Kristie Wilson | Case number (if know) | |
|-----|--|---|----------|
| 4.1 | Cavalry SPV I, LLC Nonpriority Creditor's Name Attn: Cusomer Care | Last 4 digits of account number When was the debt incurred? | Unknown |
| | 500 Summit Lake Drive, Suite 400 Valhalla, NY 10595 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | |
| | ■ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | \square Check if this claim is for a community | Student loans | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |
| 4.2 | Cbe Group Nonpriority Creditor's Name | Last 4 digits of account number 3933 | \$686.00 |
| | Attn: Bankruptcy Po Box 900 | When was the debt incurred? Opened 07/16 | |
| | Waterloo, IA 50704 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other Specify Collection Attorney Directv | |
| 4.3 | CENTURYLINK Nonpriority Creditor's Name | Last 4 digits of account number 3898 | \$553.23 |
| | Nonpriority Creditor's Name PO BOX 4300 ATTN: BANKRUPTCY DEPT | When was the debt incurred? | |
| | Carol Stream, IL 60197 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community debt | Student loans | |
| | ls the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | Other. Specify | |
| | | | |

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| | or1 Anthony Wilson Kristie Wilson | Case number (if know) | | |
|-----|--|--|-------------|--|
| 4.4 | Credit Collections Svc Nonpriority Creditor's Name | Last 4 digits of account number0340 | \$303.00 | |
| | Po Box 773 | When was the debt incurred? | | |
| | Needham, MA 02494 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | · · · · · · · · · · · · · · · · · · · | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | □ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did no report as priority claims | t | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | ■ Other Specify 06 Progressive | | |
| | | | | |
| 4.5 | Dominion Power Nonpriority Creditor's Name | Last 4 digits of account number 0644 | \$1,513.66 | |
| | Attn: Bkr. Dept. P.O. Box 26543 | When was the debt incurred? | _ | |
| | Richmond, VA 23290 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | As of the date you me, the claim is. Oneck all that apply | | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | | ☐ Debtor 2 only ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only □ Disputed | | | |
| | ☐ At least one of the debtors and another | | | |
| | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did no report as priority claims | t | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | |
| | ☐ Yes | ■ Other Specify Electricity | | |
| | | | | |
| 4.6 | Fst Premier Nonpriority Creditor's Name | Last 4 digits of account number 6660 | \$548.00 | |
| | , | Opened 05/12 Last | | |
| | 601 S Minneapolis Ave Sioux Falls, SD 57104 | When was the debt incurred? Active 6/03/13 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did no report as priority claims | t | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | |
| | ☐ Yes | | | |
| | □ res | Other. Specify Credit Card | | |

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| | 1 Anthony Wilson 2 Kristie Wilson | | Case number (if know) | |
|-----|--|---|--|-------------|
| 4.7 | Fst Premier Nonpriority Creditor's Name | Last 4 digits of account number | 5268 | \$514.00 |
| | 601 S Minneapolis Ave Sioux Falls, SD 57104 | When was the debt incurred? | Opened 09/09 Last Active 6/16/13 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | | |
| | Debtor 1 only | | | |
| | Debtor 2 only | Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | d alaim. | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured ☐ Student loans | d claim: | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | · | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | ■ Other Specify Credit Ca | rd | |
| 4.8 | General Motors Acceptance Corp. Nonpriority Creditor's Name | Last 4 digits of account number | 2038 | \$18,469.22 |
| | 801 Cherry Street, Ste. 3500 Fort Worth, TX 76102 | When was the debt incurred? | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | _ ' | | |
| | ☐ At least one of the debtors and another | | | |
| | ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separ Is the claim subject to offset? ☐ Check if this claim is for a community ☐ Obligations arising out of a separ report as priority claims | | | |
| | | | ration agreement or divorce that you did not | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | ■ Other. Specify Collectic | | |
| 4.9 | Merrick Bank/Geico Card Nonpriority Creditor's Name | Last 4 digits of account number | 6871 | \$1,293.00 |
| | Po Box 23356 Pittsburg, PA 15222 | When was the debt incurred? | Opened 09/11 Last Active 5/19/13 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | No | ☐ Debts to pension or profit-sharin | | |
| | Yes | Other Specify Credit Ca | rd | |

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| r1 Anthony Wilson r2 Kristie Wilson | | Case number (if know) | |
|---|--|--|---------|
| Merrick Bank/Geico Card | Last 4 digits of account number | 9764 | \$946.0 |
| Nonpriority Creditor's Name | | Opened 05/11 Last | |
| Po Box 23356 | When was the debt incurred? | Active 4/02/13 | |
| Pittsburg, PA 15222 | = A. (64 - 144 - 64 - 64 - 44 - 44 - 44 - 44 - | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| _ | | | |
| Debtor 1 only | Contingent | | |
| Debtor 2 only | Unliquidated | | |
| Debtor 1 and Debtor 2 only | Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | ■ Other Specify <u>Credit Ca</u> | ard | |
| Mid Am B&T Credit Card | Last 4 digits of account number | 2427 | \$304.0 |
| Nonpriority Creditor's Name | | | 10000 |
| Po Box 68 | | Opened 10/15 Last | |
| Ralla, MO 65402 | When was the debt incurred? | Active 9/02/16 | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | □ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharin | ng plans, and other similar debts | |
| Yes | ■ Other Specify Credit Ca | | |
| | | | |
| Midland Funding Nonpriority Creditor's Name | Last 4 digits of account number | 3751 | \$415.0 |
| 2365 Northside Dr Suite 300 | When was the debt incurred? | Opened 05/15 | |
| San Diego, CA 92108 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | | | |
| <u> </u> | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecure | d claim: | |
| At least one of the debtors and another | Student loans | u viunii. | |
| ☐ Check if this claim is for a community debt | | vestion agreement or divisor - the torong distance | |
| Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharin | ng plans, and other similar debts | |
| ☐ Yes | ■ Factoring | g Company Account Ge Retail Bank | |

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| 2 Kristie Wilson | | Case number (if know) | |
|--|--|---|----------|
| Midnight Velvet | Last 4 digits of account number | 8290 | \$541.00 |
| Nonpriority Creditor's Name Swiss Colony/Midnight Velvet | | Opened 12/10 Last | |
| 1112 7th Ave | When was the debt incurred? | Active 12/03/12 | |
| Monroe, WI 53566 Number Street City State Zlp Code | As of the date you file, the claim i | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | ■ Other. Specify Charge Ac | ccount | |
| Online Callestine | | 0220 | ¢175 00 |
| Online Collections Nonpriority Creditor's Name Po Box 1489 | Last 4 digits of account number When was the debt incurred? | 9238 Opened 04/16 | \$175.00 |
| Winterville, NC 28590 | | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| _ | | | |
| Debtor 1 only | Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| At least one of the debtors and another | Student loans | u Claim. | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | | aration agreement or divorce that you did not | |
| No | ☐ Debts to pension or profit-sharin | a plane, and other similar debts | |
| ■ No Yes | Collectio | on Attorney Halifax Req | |
| Tes | Other. Specify Emerg Dep | ot Drs | |
| Online Collections | Last 4 digits of account number | 2424 | \$73.00 |
| Nonpriority Creditor's Name Po Box 1489 Winterville, NC 28590 | When was the debt incurred? | Opened 03/16 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| ■ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt | | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| ■ No | Debts to pension or profit-sharing | | |
| □Yes | Other. Specify Collection Regional | n Attorney Halifax Med Center | |

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| 1 Anthony Wilson 2 Kristie Wilson | | Case number (if know) | | | | |
|--|---|--|-----------|--|--|--|
| Portfolio Recovery | Last 4 digits of account number | 1698 | \$836.00 | | | |
| Nonpriority Creditor's Name Po Box 41067 | - When was the debt incurred? | Opened 01/14 | | | | |
| Norfolk, VA 23541 | _ | | | | | |
| Number Street City State ZIp Code | As of the date you file, the claim i | is: Check all that apply | | | | |
| Who incurred the debt? Check one. | _ | | | | | |
| Debtor 1 only | Contingent | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| Check if this claim is for a community | ☐ Student loans | | | | | |
| debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | | | | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | |
| ☐ Yes | ■ Other Specify Factoring Capital F | Company Account Ge Retail Bank | | | | |
| Santander Consumer USA Nonpriority Creditor's Name | Last 4 digits of account number | 1000 | \$9,521.0 | | | |
| • • | | Opened 10/11 Last | | | | |
| Po Box 961245 Ft Worth, TX 76161 | When was the debt incurred? | Active 2/08/16 | | | | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | | |
| Who incurred the debt? Check one. | , 10 o. 110 dato you, 110 o.a | or chook all that apply | | | | |
| ■ Debtor 1 only | ☐ Contingent | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| debt | | ration agreement or divorce that you did not | | | | |
| Is the claim subject to offset? | report as priority claims | | | | | |
| No | Debts to pension or profit-sharing | | | | | |
| Yes | Other. Specify Deficience | y Balance | | | | |
| Seventh Avenue | Last 4 digits of account number | 8570 | \$409.0 | | | |
| Nonpriority Creditor's Name Seventh Avenue, Inc 1112 7th Ave | When was the debt incurred? | Opened 08/11 Last Active 12/04/12 | | | | |
| Monroe, WI 53566 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | | |
| Who incurred the debt? Check one. | , | | | | | |
| ■ Debtor 1 only | | | | | | |
| Debtor 2 only | ☐ Contingent☐ Unliquidated | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | |
| ☐ Check if this claim is for a community | | | | | | |
| debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | | | | | |
| Is the claim subject to offset? | report as priority claims | | | | | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| Yes | ■ Other. Specify Charge Ac | | | | | |

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| | r1 Anthony Wilson r2 Kristie Wilson | | Case number (if know) | |
|----------|---|--|---|------------|
| 4.1 9 | Southwest Credit Systems Nonpriority Creditor's Name | Last 4 digits of account number | 3080 | \$808.00 |
| | 4120 International Parkway Suite 1100 Carrollton, TX 75007 | When was the debt incurred? | Opened 07/16 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecure | d claim. | |
| | ☐ At least one of the debtors and another☐ Check if this claim is for a community | Student loans | a ciaiii. | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | ■ Other. Specify Communication | n Attorney Charter | |
| 4.2 0 | Us Dept of Ed Nonpriority Creditor's Name | Last 4 digits of account number | 8581 | \$3,934.00 |
| | 2401 International Madison, WI 53704 | When was the debt incurred? | Opened 02/11 Last Active 6/11/12 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent☐ Unliquidated | | |
| | Debtor 2 only | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecure | d claim: | |
| | ☐ At least one of the debtors and another☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify | | |
| | | Education | nal | |
| 4.2 1 | Verizon Nonpriority Creditor's Name | Last 4 digits of account number | 0001 | \$1,406.00 |
| | 500 Technology Dr Suite 500 Weldon Spring, MO 63304 | When was the debt incurred? | Opened 05/04 Last Active 8/31/13 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | | |
| | ■ No | ☐ Debts to pension or profit-sharin | | |
| | □ Yes | _ | | |
| | | | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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| Debtor 1 Anthony Wilson Debtor 2 Kristie Wilson | | Case number (if know) | | | |
|--|--|--|--|--|--|
| have more than one creditor for any of the debts t notified for any debts in Parts 1 or 2, do not fill ou | | tional creditors here. If you do not have additional persons to be | | | |
| Name and Address | On which entry in Part 1 or Part 2 did you | list the original creditor? | | | |
| IC Systems, Inc. | Line 4.21 of (Check one): | Part 1: Creditors with Priority Unsecured Claims | | | |
| P.O. Box 64437 Saint Paul, MN 55164 | | Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| Saint Taul, Ph. 33104 | Last 4 digits of account number | · • | | | |
| Name and Address | On which entry in Part 1 or Part 2 did you | list the original creditor? | | | |
| Kirschbaum, Nanney, Keenan& | Line 4.8 of (Check one): | Part 1: Creditors with Priority Unsecured Claims | | | |
| Griffin P.O. Box 19806 Raleigh, NC 27619 | | Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| Raieign, NC 27019 | Last 4 digits of account number | | | | |
| Name and Address | On which entry in Part 1 or Part 2 did you | list the original creditor? | | | |
| Thomas Law offices, PLLC | Line 4.1 of (Check one): | Part 1: Creditors with Priority Unsecured Claims | | | |
| 7 Skyline Drive, 1st Floor Hawthorne, NY 10532 | | Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| | Last 4 digits of account number | | | | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------------|-----|---|-----|-----------------|
| Total | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| claims from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 1,378.24 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 1,378.24 |
| | | | | Total Claim |
| Total | 6f. | Student loans | 6f. | \$ 3,934.00 |
| claims | 0- | Obligations original and of a consentian armount or discount that | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 39,314.11 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 43,248.11 |

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| Fill in this inform | | | | | |
|---------------------|------------------------------|--------------------|-------------------|----------------------------------|--|
| Debtor 1 | Anthony Wilson First Name | Middle Name | Last Name | | |
| Debtor 2 | Kristie Wilson | ı | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Bar | nkruptcy Court for the: | EASTERN DISTRICT O | OF NORTH CAROLINA | | |
| Case number | | | | ☐ Check if this is amended filin | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| ı | Person or | company with Name, Number | whom you have th | e contract or lease | State what the contract or lease is for |
|-----|-----------|------------------------------|------------------|---------------------|---|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | <u> </u> |
| 2.3 | Oity | | Olate | Zii Oddc | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.5 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | <u> </u> |

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| Fill in this | information to identify yo | our case: | | | |
|--------------------------------|-------------------------------------|---|--------------------------|---|--------|
| Debtor 1 | Anthony Wil | | | | |
| Dobtor 2 | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing | mg) Kristie Wil First Name | Middle Name | Last Name | | |
| United Sta | ites Bankruptcy Court for th | e: EASTERN DISTRICT O | F NORTH CAROLINA | | |
| Case num | ber | | | | |
| (if known) | | | | ☐ Check if this is an | |
| | | | | amended filing | |
| Officia | I Form 106H | | | | |
| Sched | lule H: Your Co | odebtors | | 12/1 | 15 |
| | | | | | |
| our name | and case number (if kno | wn). Answer every question (If you are filing a joint case, of | | to this page. On the top of any Additional Pages, wri | |
| = | | | | | |
| ■ No □ Yes | 3 | | | | |
| 2. Witl | hin the last 8 years, have | you lived in a community pr | operty state or territor | ry? (Community property states and territories include | |
| | | ana, Nevada, New Mexico, Pu | | | |
| ■ No. | Go to line 3. | | | | |
| | | spouse, or legal equivalent live | with you at the time? | | |
| | | | | | |
| in line Form | e 2 again as a codebtor or | nly if that person is a guaran | tor or cosigner. Make | r if your spouse is filing with you. List the person sh sure you have listed the creditor on Schedule D (Of 06G). Use Schedule D, Schedule E/F, or Schedule G | ficial |
| | Column 1: Your codebtor | | | Column 2: The creditor to whom you owe the do | ebt |
| | Name, Number, Street, City, State a | and ZIP Code | | Check all schedules that apply: | |
| 3.1 | | | | ☐ Schedule D, line | |
| | Name | | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| - | Number Street | | | _ | |
| | City | State | ZIP Code | | |
| 3.2 | | | | ☐ Schedule D, line | |
| | Name | | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| - | Number Street | | | _ | |
| | City | State | ZIP Code | | |

| Official Fo | orm 106l | MM / DD/ YYYY |
|---------------------------|--|---|
| | | A supplement showing postpetition chapter 13 income as of the following date: |
| Case number (If known) | | Check if this is: ☐ An amended filing |
| United States Bar | nkruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA | _ |
| (Spouse, if filing) | MIDDIE WILDON | _ |
| Debtor 2 | Kristie Wilson | |
| Debtor 1 | Anthony Wilson | _ |
| Fill in this informa | ation to identify your case: | |
| | | |

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. ☐ Employed ■ Employed If you have more than one job, **Employment status** attach a separate page with Not employed ■ Not employed information about additional employers. Occupation Quality Lab Disabled Include part-time, seasonal, or Employer's name Oran Safety Glass self-employed work. **Employer's address** Occupation may include student 48 Industrial Parkway or homemaker, if it applies. Emporia, VA 23847 How long employed there? 5 months

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

- 3. Estimate and list monthly overtime pay.
- Calculate gross Income. Add line 2 + line 3.

| | | TOT Debtor 1 | non-filing spouse | | | | |
|----|-----|--------------|-------------------|------|--|--|--|
| 2. | \$ | 1,091.26 | \$ | 0.00 | | | |
| 3. | +\$ | 0.00 | +\$ | 0.00 | | | |
| 4. | \$ | 1,091.26 | \$ | 0.00 | | | |

For Debtor 1 For Debtor 2 or

Official Form 106I Schedule I: Your Income page 1

| | tor 1 tor 2 | Anthony Wilson Kristie Wilson | | C | ase | e number (if known) | | | | | |
|-----|--|--|---|---------|--|--|--------------------------------|------------------------|---|---------------|--------------|
| | Com | vy line 4 hove | 4 | | Fo: | r Debtor 1 | no | r Debtor n-filing s | pou | ise | |
| | Cop | y line 4 here | 4. | | Ф_ | 1,091.26 | \$_ | | 0 | .00 | |
| 5. | List | all payroll deductions: | | | | | | | | | |
| | 5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h. | Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify: | 5a 5b 5c 5d 5e 5f. 5g 5h | - - | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | 125.42 0.00 0.00 0.00 0.00 0.00 0.00 0.00 | \$_ \$_ \$_ \$_ + | | 0 | .00 | |
| 6. | | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | _ 6. | | * – \$ | 125.42 | \$ | | | .00 | |
| 7. | | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | * - \$ | 965.84 | \$ | | | .00 | |
| 8. | 8b. 8c. 8d. 8e. 8f. 8g. 8h. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Food Stamps Pension or retirement income Other monthly income. Specify: | 8a 8b 8c 8d 8e 8f. 8g 8h | | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | 0.00 0.00 0.00 0.00 0.00 | \$_ \$_ \$_ \$_ +_ | 5 | 0.0000000000000000000000000000000000000 | .00 | 1 |
| 9. | Add | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | _ | 0.00 | \$_ | 1, | 678 | 3.00 | 1 |
| 10. | | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$_ | | 965.84 + \$ | 1,6 | 78.00 | = \$ | 2, | 643.84 |
| 11. | 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 | | | | | | | | | | |
| 12. | | I the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain lies | | | | | | e. 12. | \$ | | 643.84 |
| 13. | Do y | you expect an increase or decrease within the year after you file this form? No. Yes. Explain: | ? | | | | | | | mbin nthly | ed income |

Official Form 106I Schedule I: Your Income page 2

| Fill i | n this informa | ation to identify yo | our case: | · | | | | | | |
|-------------|----------------------------|---------------------------------------|----------------|--|--|-------------------|------------|--------------------------------------|--|---|
| Debt | or 1 | Anthony Wi | lson | | | Cł | neck | if this is: | | |
| | | interior wa | | | | | | n amended filing | | |
| Debt | | Kristie Wi | lson | | | | | | ving postpetition chapter | |
| (Spo | use, if filing) | | | | | | 1 | 3 expenses as or | the following date: | |
| Unite | ed States Bank | ruptcy Court for the | : EASTE | RN DISTRICT OF NORTH | I CAROLINA | | N | MM / DD / YYYY | | |
| | e numbe r nown) | | | | | | | | | |
| | | | | | | | | | | |
| | | rm 106J | | | | | | | | |
| | | J: Your | | | | | | | 12/1 | 5 |
| info | rmation. If m | | eded, atta | If two married people an ch another sheet to this n. | | | | | | |
| Part 1. | 1: Desci | ribe Your House | ehold | | | | | | | _ |
| ١. | □ No. Go to | | | | | | | | | |
| | _ | | in a conar | ate household? | | | | | | |
| | | | iii a sepai | ate nousenoia: | | | | | | |
| | ■ N | | -+ til- Otti-i | al Farra 400 LO. Francisco | fan Cananata Hawaaha | -1-1 -4 D | - 1- 4 - | - 0 | | |
| | ЦY | es. Deptor 2 mus | st file Offici | al Form 106J-2, Expenses | ror Separate Housend | טומ טו ט | ebto | r Z. | | |
| 2. | Do you hav | e dependents? | ☐ No | | | | | | | |
| | Do not list D Debtor 2. | ebtor 1 and | Yes. | Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor 2 | | | Dependent's age | Does dependent live with you? | |
| | Do not state | the | | | | | | | □ No | |
| | dependents | | | | Son | | | 15 | ■ Yes | |
| | | | | | | | | | □ No | |
| | | | | | Son | | | 16 | Yes | |
| | | | | | | | | | □ No | |
| | | | | | | | | | ☐ Yes | |
| | | | | | | | | | □ No | |
| 3. | Do your ox | oenses include | _ | | | | | | ☐ Yes | |
| J. | expenses o | f people other t d your depende | han □ | No Yes | | | | | | |
| Part | 2: Estim | ate Your Ongoi | na Monthi | v Expenses | | | | | | |
| Esti exp | mate your ex | kpenses as of y | our bankrı | uptcy filing date unless y y is filed. If this is a supp | ou are using this for olemental Schedule J | m as a , check | sup the | plement in a Cha box at the top o | pter 13 case to report f the form and fill in the | _ |
| • • | | o moid for with | nan caal | | f van Iman | | | | | |
| | | | | government assistance i cluded it on <i>Schedule I:</i>) | | | | | | |
| | icial Form 10 | | | | | | _ | Your exp | enses | |
| | | | | | | | | | | |
| 4. | | or home owners and any rent for th | | ses for your residence. I or lot. | nclude first mortgage | 4. | \$ | | 0.00 | |
| | If not include | ded in line 4: | | | | | | | | |
| | 4a. Real | estate taxes | | | | 4a. | \$ | | 0.00 | |
| | | erty, homeowner's | s, or renter | 's insurance | | 4b. | - 1 | | 0.00 | |
| | | maintenance, re | | upkeep expenses | | 4c. | | | 150.00 | |

5. Additional mortgage payments for your residence, such as home equity loans

| Debtor 1 Anthony Wilson Debtor 2 Kristie Wilson | Case number (if known) | |
|---|-------------------------------|----------|
| 6. Utilities: | | |
| 6a. Electricity, heat, natural gas | 6a. \$ | 280.00 |
| 6b. Water, sewer, garbage collection | 6b. \$ | 45.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. \$ | 274.00 |
| 6d. Other. Specify: | 6d. \$ | 0.00 |
| 7. Food and housekeeping supplies | 7. \$ | 765.00 |
| Childcare and children's education costs | 8. \$ | 0.00 |
| 9. Clothing, laundry, and dry cleaning | 9. \$ | 250.00 |
| 10. Personal care products and services | 10. \$ | 0.00 |
| 11. Medical and dental expenses | 11. \$ | 200.00 |
| 12. Transportation. Include gas, maintenance, bus or train fare. | Π. Ψ | 200:00 |
| Do not include car payments. | 12. \$ | 300.00 |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books | 13. \$ | 0.00 |
| 14. Charitable contributions and religious donations | 14. \$ | 0.00 |
| 15. Insurance. | ι φ | 0.00 |
| Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | 15a. \$ | 0.00 |
| 15b. Health insurance | | |
| 15c. Vehicle insurance | 15c. \$ | 0.00 |
| 15d. Other insurance. Specify: | 15d. \$ | 0.00 |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | 13α. ψ | 0.00 |
| Specify: COUNTY TAXES | 16. \$ | 54.50 |
| 17. Installment or lease payments:17a. Car payments for Vehicle 1 | 17a. \$ | 0.00 |
| 17b. Car payments for Vehicle 2 | | |
| | | |
| 17c. Other Specify: | 17c. \$ | 0.00 |
| 17d. Other. Specify: | 17d. \$ | 0.00 |
| Your payments of alimony, maintenance, and support that you did not report deducted from your pay on line 5, Schedule I, Your Income (Official Form 106 | | 0.00 |
| 19. Other payments you make to support others who do not live with you. | \$ | 0.00 |
| Specify: | 19. | 0.00 |
| 20. Other real property expenses not included in lines 4 or 5 of this form or on So | | |
| 20a. Mortgages on other property | 20a. \$ | 0.00 |
| 20b. Real estate taxes | 20b. \$ | 0.00 |
| 20c. Property, homeowner's, or renter's insurance | 20c. \$ | 0.00 |
| 20d. Maintenance, repair, and upkeep expenses | 20d. \$ | 0.00 |
| 20e. Homeowner's association or condominium dues | 20e. \$ | 0.00 |
| 21. Other: Specify: School Expenses | 21. +\$ | 100.00 |
| 21. Other. Specify. School Expenses | Ζ1. +Ψ | 100.00 |
| 22. Calculate your monthly expenses | | |
| 22a. Add lines 4 through 21. | \$ | 2,458.50 |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J- | 2 \$ | |
| 22c. Add line 22a and 22b. The result is your monthly expenses. | \$ | 2,458.50 |
| , , , , | Ψ | |
| 23. Calculate your monthly net income. | | |
| 23a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. \$ | 2,643.84 |
| 23b. Copy your monthly expenses from line 22c above. | 23b\$ | 2,458.50 |
| | | |
| 23c. Subtract your monthly expenses from your monthly income. | | 105.04 |
| The result is your monthly net income. | 23c. \$ | 185.34 |
| 24. Do you expect an increase or decrease in your expenses within the year after For example, do you expect to finish paying for your car loan within the year or do you expect y modification to the terms of your mortgage? ☐ No. ☐ Yes. Explain here: Wife's social secuirty mothly benefits the paying for your car loan within the year after your expect year. | our mortgage payment to incre | |
| maddana o rari cimo emproymente. | | |

| Fill in this infor | mation to identify your | case: | | |
|--|--|---|---|--|
| Debtor 1 | Anthony Wilson | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Kristie Wilson | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | EASTERN DISTRICT (| OF NORTH CAROLINA | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| Official Forr | m 106Dec | | | |
| Declarat | tion About a | n Individua | Debtor's Schedu | lles 12/15 |
| · You must file thi | is form whenever you fil | e bankruptcy schedule | | a false statement, concealing property, or |
| You must file thi obtaining mone years, or both. 1 | is form whenever you fil | e bankruptcy schedule connection with a ban | s or amended schedules. Making a | |
| You must file thi obtaining money years, or both. 1 | is form whenever you fil y or property by fraud in 8 U.S.C. §§ 152, 1341, 19 | le bankruptcy schedule I connection with a ban 519, and 3571. | s or amended schedules. Making a | a false statement, concealing property, or to \$250,000, or imprisonment for up to 20 |
| You must file thi obtaining money years, or both. 1 | is form whenever you fil y or property by fraud in 8 U.S.C. §§ 152, 1341, 19 | le bankruptcy schedule I connection with a ban 519, and 3571. | s or amended schedules. Making a kruptcy case can result in fines up | a false statement, concealing property, or to \$250,000, or imprisonment for up to 20 |
| You must file thi obtaining mone years, or both. 1 Sig Did you pa | is form whenever you fil y or property by fraud in 8 U.S.C. §§ 152, 1341, 19 | le bankruptcy schedule I connection with a ban 519, and 3571. | s or amended schedules. Making a kruptcy case can result in fines up | a false statement, concealing property, or to \$250,000, or imprisonment for up to 20 y forms? Attach Bankruptcy Petition Preparer's Notice, |
| You must file thi obtaining mone years, or both. 1 Sig Did you pa | is form whenever you fil y or property by fraud in 8 U.S.C. §§ 152, 1341, 19 n Below | le bankruptcy schedule I connection with a ban 519, and 3571. | s or amended schedules. Making a kruptcy case can result in fines up | a false statement, concealing property, or to \$250,000, or imprisonment for up to 20 y forms? |
| You must file thi obtaining money years, or both. 1 Sig Did you pa No Yes. 1 | is form whenever you fill y or property by fraud in 8 U.S.C. §§ 152, 1341, 19 in Below Below Name of person | le bankruptcy schedule a connection with a ban 519, and 3571. | s or amended schedules. Making a kruptcy case can result in fines up | A false statement, concealing property, or to \$250,000, or imprisonment for up to 20 by forms? Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) |
| You must file thi obtaining money years, or both. 1 Sig Did you pa No Yes. I Under penathat they ar | is form whenever you fill y or property by fraud in 8 U.S.C. §§ 152, 1341, 19 in Below Below Name of person alty of perjury, I declare to the true and correct. | le bankruptcy schedule a connection with a ban 519, and 3571. | s or amended schedules. Making a kruptcy case can result in fines up rney to help you fill out bankruptcy | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) |
| You must file thi obtaining money years, or both. 1 Sig Did you pa No Yes. I Under penathat they ar | is form whenever you fill y or property by fraud in 8 U.S.C. §§ 152, 1341, 19 n Below y or agree to pay some Name of person | le bankruptcy schedule a connection with a ban 519, and 3571. | s or amended schedules. Making a kruptcy case can result in fines up rney to help you fill out bankruptcy | y forms? Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) s declaration and |

Date September 27, 2016

Date September 27, 2016

| Fill in | this inforn | nation to identify your | case: | | | |
|------------------|-----------------------|---|--|---|--|---|
| Debto | or 1 | Anthony Wilso | n | | | |
| | | First Name | Middle Name | Last Name | | |
| Debto (Spous | or 2 e if, filing) | Kristie Wilso First Name | n Middle Name | Last Name | | |
| Unite | d States Bar | nkruptcy Court for the: | EASTERN DISTRICT OF | NORTH CAROLINA | | |
| | | | | | | |
| Case (if know | number | | | | _ | heck if this is an nended filing |
| Stat | ement | | Affairs for Indivio | | ankruptcy | 4/16 |
| | | ore space is needed, n). Answer every ques | | this form. On the top of any | additional pages, write you | r name and case |
| Part ' | Give D | etails About Your Ma | rital Status and Where You | Lived Before | | |
| 1. V | /hat is you | current marital statu | s? | | | |
| | ■ Married ■ Not mar | ried | | | | |
| 2. D | uring the la | ast 3 years, have you | lived anywhere other than | where you live now? | | |
| • | ■ No ■ Yes. Lis | t all of the places you li | ved in the last 3 years. Do no | ot include where you live now | : | |
| ı | Debtor 1 Pr | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| | | | | | ity property state or territory co, Texas, Washington and W | |
| ■ | No Yes. Ma | ke sure you fill out <i>Sch</i> | nedule H: Your Codebtors (Of | ficial Form 106H). | | |
| Part 2 | Explai | n the Sources of You | r Income | | | |
| F | ill in the tota | I amount of income you | nployment or from operatin u received from all jobs and a have income that you receive | ill businesses, including part- | | dar years? |
| • | | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$1,985.45 | ☐ Wages, commissions, bonuses, tips | \$0.00 |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

Debtor 1 Anthony Wilson
Debtor 2 Kristie Wilson Case number (if known)

| | Debtor 1 | | Debtor 2 | | |
|---|--|--|--|---|--|
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | |
| For last calendar year: (January 1 to December 31, 2015) | ■ Wages, commissions, bonuses, tips | \$30,731.00 | ☐ Wages, commissions, bonuses, tips | \$0.00 | |
| | ☐ Operating a business | | ☐ Operating a business | | |
| For the calendar year before that: (January 1 to December 31, 2014) | ■ Wages, commissions, bonuses, tips | Unknown | ☐ Wages, commissions, bonuses, tips | \$0.00 | |
| | ☐ Operating a business | | ☐ Operating a business | | |

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

□ No

Yes. Fill in the details.

| | Debtor 1 | | Debtor 2 | | |
|---|--------------------------------------|---|--------------------------------------|---|--|
| | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) | |
| From January 1 of current year until the date you filed for bankruptcy: | | \$0.00 | Social Sec. | \$6,318.00 | |
| | | \$0.00 | Child Support | \$3,537.00 | |
| For last calendar year: (January 1 to December 31, 2015) | | \$0.00 | Social Sec. | \$8,424.00 | |
| | | \$0.00 | Child Support | \$4,716.00 | |
| For the calendar year before that: (January 1 to December 31, 2014) | | \$0.00 | Social Sec. | \$8,424.00 | |
| | | \$0.00 | Child Support | \$4,716.00 | |

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

| 6. | Are either | Debtor 1 | 's or | Debtor | 2's | debts | primarily | consumer | debts? |
|----|------------|----------|-------|--------|-----|-------|-----------|----------|--------|
|----|------------|----------|-------|--------|-----|-------|-----------|----------|--------|

□ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

☐ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

^{*} Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Case 16-05024-5-JNC Doc 1 Filed 09/27/16 Entered 09/27/16 14:56:10 Page 51 of 69 Debtor 1 Anthony Wilson Case number (if known) Debtor 2 Kristie Wilson Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address Dates of payment Total amount** Amount you Was this payment for ... paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο ☐ Yes. List all payments to an insider. Insider's Name and Address Dates of payment **Total amount** Amount vou Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Reason for this payment Dates of payment **Total amount** Amount you still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody

Court or agency

P.O. Box 66

House

Halifax County Court

Halifax, NC 27839

Nature of the case

Foreclosure

Statement of Financial Affairs for Individuals Filing for Bankruptcy

☐ No

Case title

Case number

16-SP-46

Kristie Wilson

modifications, and contract disputes.

Ditech vs Anthony Wilson &

Yes. Fill in the details.

Status of the case

□ Pending

□ On appeal

Concluded

Case 16-05024-5-JNC Doc 1 Filed 09/27/16 Entered 09/27/16 14:56:10 Page 52 of 69

| | otor 2 Kristie Wilson | | Case number (| (if known) | |
|-----|--|--|------------------------------|--------------------------|---------------------------|
| 10. | Within 1 year before you filed for bankru Check all that apply and fill in the details be | | repossessed, foreclosed | , garnished, attache | d, seized, or levied? |
| | ☐ No. Go to line 11. | | | | |
| | Yes. Fill in the information below. | | | | |
| | Creditor Name and Address | Describe the Property | | Date | Value of the |
| | | | | | property |
| | | Explain what happened | | 1 /0016 | ** 1 |
| | Santander Consumer USA Po Box 961245 | 2005 Mercury Marin | er | 1/2016 | Unknown |
| | Ft Worth, TX 76161 | ■ Property was repossesse | ed. | | |
| | | ☐ Property was foreclosed. | | | |
| | | ☐ Property was garnished. | | | |
| | | ☐ Property was attached, s | eized or levied. | | |
| | accounts or refuse to make a payment b ■ No □ Yes. Fill in the details. | · | | | |
| | Creditor Name and Address | Describe the action the cr | editor took | Date action was taken | Amount |
| Par | ■ No □ Yes t5: List Certain Gifts and Contribution | s | | | |
| 13. | Within 2 years before you filed for bank | uptcy, did you give any gifts w | ith a total value of more th | nan \$600 per person | ? |
| | ■ No | | | | |
| | Yes. Fill in the details for each gift. | | | _ | |
| | Gifts with a total value of more than \$6 per person | Describe the gifts | | Dates you gave the gifts | Value |
| | Person to Whom You Gave the Gift and Address: | | | | |
| 14. | Within 2 years before you filed for bank ■ No | uptcy, did you give any gifts o | contributions with a total | I value of more than | \$600 to any charity? |
| | \square Yes. Fill in the details for each gift or | ontribution. | | | |
| | Gifts or contributions to charities that more than \$600 Charity's Name | otal Describe what you co | ontributed | Dates you contributed | Value |
| | Address (Number, Street, City, State and ZIP Coo | e) | | | |
| Par | t 6: List Certain Losses | | | | |
| 15. | Within 1 year before you filed for bankru or gambling? | ptcy or since you filed for banl | kruptcy, did you lose anyt | hing because of the | ft, fire, other disaster, |
| | ■ No | | | | |
| | Yes. Fill in the details. | | | | |
| | Describe the property you lost and | Describe any insurance cover | rage for the loss | Date of your | Value of property |
| | how the loss occurred | Include the amount that insuran insurance claims on line 33 of S | ce has paid. List pending | loss | lost |
| | | | | | |

Debtor 1 Anthony Wilson Debtor 2 Kristie Wilson

Case number (if known)

| Par | t 7: List Certain Payments or Transfers | | | | | | | | |
|-----|---|---------------------------------|---|--------------|---|---|--|--|--|
| 16. | Within 1 year before you filed for bankruptcy consulted about seeking bankruptcy or prep Include any attorneys, bankruptcy petition prepare | aring a bankruptcy pe | tition? | | | rty to anyone you | | | |
| | □ No | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and variansferred | Description and value of any property transferred | | Date payment or transfer was made | Amount of payment | | | |
| | Law Office of Lenita Webb Arrington, PLLC 1027 East Tenth Street Roanoke Rapids, NC 27870 lenita@attorneyarrington.com | Attorney Fee | S | | 9/16 | \$12.00 | | | |
| 17. | Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you No | s or to make payments | | ehalf pay or | transfer any prope | rty to anyone who | | | |
| | ☐ Yes. Fill in the details. | | | | | | | | |
| | Person Who Was Paid Address | Description and variansferred | Description and value of any property transferred | | Date payment or transfer was made | Amount of payment | | | |
| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. | | | | | | | | |
| | ☐ Yes. Fill in the details. | | | | | | | | |
| | Person Who Received Transfer Address | | | | ny property or eceived or debts hange | Date transfer was made | | | |
| | Person's relationship to you | | | | | | | | |
| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No | | | | | | | | |
| | Yes. Fill in the details. | Description and | Description and value of the property transferre | | | Date Transfer was | | | |
| | Name of trust | Description and V | alue of the property | / transferre | a | made | | | |
| Par | t 8: List of Certain Financial Accounts, Ins | truments, Safe Deposi | t Boxes, and Storag | e Units | | | | | |
| 20. | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. | | | | | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account o instrument | clos | e account was sed, sold, ved, or sferred | Last balance before closing or transfer | | | |
| | | | | | | | | | |

| Debtor 1 | Anthony | Wilson |
|----------|---------|--------|
| Debtor 2 | Kristie | Wilson |

Case number (if known)

| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? | | | | | | | |
|-----|--|--|--------------------------------------|-----------------------|--|--|--|--|
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? | | | | |
| 22. | Have you stored property in a storage unit or p | lace other than your home within 1 | year before you filed for bankruptcy | ? | | | | |
| | No | | | | | | | |
| | Yes. Fill in the details. | | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? | | | | |
| Par | 9: Identify Property You Hold or Control for | Someone Else | | | | | | |
| 23. | Do you hold or control any property that some for someone. | one else owns? Include any propert | y you borrowed from, are storing for | r, or hold in trust | | | | |
| | ■ No | | | | | | | |
| | Yes. Fill in the details. | | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Value | | | | |
| Par | 10: Give Details About Environmental Inform | ation | | | | | | |
| For | he purpose of Part 10, the following definitions | apply: | | | | | | |
| | Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su | air, land, soil, surface water, ground | | | | | | |
| | Site means any location, facility, or property as to own, operate, or utilize it, including disposal | | aw, whether you now own, operate, | or utilize it or used | | | | |
| | Hazardous material means anything an enviror hazardous material, pollutant, contaminant, or | | waste, hazardous substance, toxic s | substance, | | | | |
| Rep | ort all notices, releases, and proceedings that y | ou know about, regardless of when | they occurred. | | | | | |
| 24. | Has any governmental unit notified you that yo | u may be liable or potentially liable | under or in violation of an environm | ental law? | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | | |
| 25. | Have you notified any governmental unit of any release of hazardous material? | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | | |
| | | | | | | | | |

| Debtor 1 | Anthony | Wilson |
|----------|---------|--------|
| Debtor 2 | Kristie | Wilson |

Case number (if known)

| 26. | Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. | | | | | | | |
|-----|--|--|---|-----------|--|--------------------|--|--|
| | | No | | | | | | |
| | | Yes. Fill in the details. | | | | | | |
| | | se Title se Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nat | ure of the case | Status of the case | | |
| Par | t 11: | Give Details About Your Business or C | connections to Any Business | | | | | |
| 27. | With | nin 4 years before you filed for bankruptc | y, did you own a business or have an | y of | the following connections to any | business? | | |
| | | lacksquare A sole proprietor or self-employed in | $a\ trade,\ profession,\ or\ other\ activity,$ | eithe | er full-time or part-time | | | |
| | | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | |
| | | ☐ A partner in a partnership | | | | | | |
| | | ☐ An officer, director, or managing exe | cutive of a corporation | | | | | |
| | ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | | | | |
| | No. None of the above applies. Go to Part 12. | | | | | | | |
| | | Yes. Check all that apply above and fill i | n the details below for each business | i. | | | | |
| | Address | | Describe the nature of the business | | Employer Identification number Do not include Social Security number or | | | |
| | | | Name of accountant or bookkeeper | | Dates business existed | | | |
| 28. | Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. | | | | | | | |
| | | No | | | | | | |
| | | Yes. Fill in the details below. | | | | | | |
| | | ne dress nber, Street, City, State and ZIP Code) | Date Issued | | | | | |
| | | | | | | | | |

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| Debtor 1 Anthony Wilson Debtor 2 Kristie Wilson | Case number (if known) |
|---|--|
| Part 12: Sign Below | |
| I have read the answers on this Star are true and correct. I understand the | tement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers nat making a false statement, concealing property, or obtaining money or property by fraud in connection in fines up to \$250,000, or imprisonment for up to 20 years, or both. |
| /s/ Anthony Wilson | /s/ Kristie Wilson |
| Anthony Wilson | Kristie Wilson |
| Signature of Debtor 1 | Signature of Debtor 2 |
| Date September 27, 2016 | Date September 27, 2016 |
| Did you attach additional pages to Y ■ No □ Yes | our Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |
| Did you pay or agree to pay someon ■ No | ne who is not an attorney to help you fill out bankruptcy forms? |
| ☐ Yes. Name of Person | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

| Fill in this information to identify your case: | | | | | |
|---|--|--|--|--|--|
| Debtor 1 | Anthony Wilson | | | | |
| Debtor 2 (Spouse, if filing) | Kristie Wilson | | | | |
| United States B | Bankruptcy Court for the: Eastern District of North Carolina | | | | |
| Case number (if known) | | | | | |

| Check as directed in lines 17 and 21: | | | | | |
|---------------------------------------|--|--|--|--|--|
| | According to the calculations required by this Statement: | | | | |
| • | 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3). | | | | |
| | 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3). | | | | |
| | 3. The commitment period is 3 years. | | | | |
| | 4. The commitment period is 5 years. | | | | |

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

| | | Colur Debte | | Colum Debton non-fil | |
|--|--|----------------|--------|----------------------------|------|
| Your gross wages, salary, tips, bonuses, overtime payroll deductions). | e, and commissions (before all | \$ | 357.78 | \$ | 0.00 |
| Alimony and maintenance payments. Do not include Column B is filled in. | de payments from a spouse if | \$ | 0.00 | \$ | 0.00 |
| All amounts from any source which are regularly of you or your dependents, including child support from an unmarried partner, members of your househ and roommates. Include regular contributions from a filled in. Do not include payments you listed on line 3 | ort. Include regular contributions old, your dependents, parents, spouse only if Column B is not | | 0.00 | \$ | 0.00 |
| Net income from operating a business, profession, or farm | Debtor 1 | | | | |
| Gross receipts (before all deductions) | \$ 0.00 | | | | |
| Ordinary and necessary operating expenses | -\$ 0.00 | | | | |
| Net monthly income from a business, profession, or f | arm \$0.00 Copy here - | > \$ | 0.00 | \$ | 0.00 |
| Net income from rental and other real property | Debtor 1 | | | | |
| Gross receipts (before all deductions) | \$0.00 | | | | |
| Ordinary and necessary operating expenses | -\$ 0.00_ | | | | |
| Net monthly income from rental or other real property | s = 0.00 Copy here - | > \$ | 0.00 | \$ | 0.00 |

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor 2 Kristie Wilson Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 0.00 7. Interest, dividends, and royalties 0.00 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 393.00 Child support 0.00 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for + \$ =| \$ 357.78 393.00 750.78 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 13. Calculate the marital adjustment. Check one: ☐ You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. ☐ You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 Total Copy here=> 0.00 750.78 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 750.78 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). **x** 12 9,009.36 15b. The result is your current monthly income for the year for this part of the form.

Anthony Wilson

Debtor 1

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Debtor 2 Kristie Wilson Case number (if known) 16. Calculate the median family income that applies to you. Follow these steps: 16a. Fill in the state in which you live. 16b. Fill in the number of people in your household. 4 69,810.00 16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) 18. Copy your total average monthly income from line 11. \$ 750.78 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 19b. Subtract line 19a from line 18. \$ 750.78 20. Calculate your current monthly income for the year. Follow these steps: 750.78 20a. Copy line 19b Multiply by 12 (the number of months in a year). x 12 9,009.36 20b. The result is your current monthly income for the year for this part of the form 69,810.00 20c. Copy the median family income for your state and size of household from line 16c 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. Part 4: Sign Below By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. X /s/ Anthony Wilson X /s/ Kristie Wilson Anthony Wilson Kristie Wilson Signature of Debtor 1 Signature of Debtor 2 Date September 27, 2016 Date September 27, 2016 MM / DD / YYYY MM / DD / YYYY If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Anthony Wilson

Debtor 1

Debtor 1 Anthony Wilson
Debtor 2 Kristie Wilson Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 03/01/2016 to 08/31/2016.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employment

Income by Month:

| 6 Months Ago: | 03/2016 | \$0.00 |
|---------------|--------------------|------------|
| 5 Months Ago: | 04/2016 | \$0.00 |
| 4 Months Ago: | 05/2016 | \$0.00 |
| 3 Months Ago: | 06/2016 | \$0.00 |
| 2 Months Ago: | 07/2016 | \$909.51 |
| Last Month: | 08/2016 | \$1,237.19 |
| | Average per month: | \$357.78 |
| | | |

Debtor1 Anthony Wilson
Debtor2 Kristie Wilson Case number (if known)

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 03/01/2016 to 08/31/2016.

Line 10 - Income from all other sources

Source of Income: Child support

Income by Month:

| | Average per month: | \$393.00 |
|---------------|--------------------|----------|
| Last Month: | 08/2016 | \$393.00 |
| 2 Months Ago: | 07/2016 | \$393.00 |
| 3 Months Ago: | 06/2016 | \$393.00 |
| 4 Months Ago: | 05/2016 | \$393.00 |
| 5 Months Ago: | 04/2016 | \$393.00 |
| 6 Months Ago: | 03/2016 | \$393.00 |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/Resources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of North Carolina

| Debtor(s) Debtor(s) Debtor(s) Debtor(s) Disclosure of Compensation of Attorney for the above compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is a For legal services, I have agreed to accept Prior to the filing of this statement I have received Balance Due S Debtor Other (specify): The source of the compensation paid to me was: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are recopy of the agreement, together with a list of the names of the people sharing in the compensation is In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy. | No. |
|--|---|
| Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is a For legal services, I have agreed to accept Prior to the filing of this statement I have received Balance Due \$ 2. \$ | er 13 |
| compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is a For legal services, I have agreed to accept Prior to the filing of this statement I have received Balance Due \$ \$ Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are received of the agreement, together with a list of the names of the people sharing in the compensation is | |
| Prior to the filing of this statement I have received Balance Due \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | paid to me, for services rendered or to |
| Balance Due \$ \$ | 5,000.00 |
| 2. \$ 310.00 of the filing fee has been paid. 3. The source of the compensation paid to me was: ■ Debtor □ Other (specify): 4. The source of compensation to be paid to me is: ■ Debtor □ Other (specify): 5. ■ I have not agreed to share the above-disclosed compensation with any other person unless they are recopy of the agreement, together with a list of the names of the people sharing in the compensation is | 12.00 |
| The source of the compensation paid to me was: ■ Debtor □ Other (specify): The source of compensation to be paid to me is: ■ Debtor □ Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are roughly of the agreement, together with a list of the names of the people sharing in the compensation is | 4,988.00 |
| ■ Debtor □ Other (specify): 4. The source of compensation to be paid to me is: ■ Debtor □ Other (specify): 5. ■ I have not agreed to share the above-disclosed compensation with any other person unless they are recopy of the agreement, together with a list of the names of the people sharing in the compensation is | |
| 4. The source of compensation to be paid to me is: ■ Debtor □ Other (specify): 5. ■ I have not agreed to share the above-disclosed compensation with any other person unless they are r. □ I have agreed to share the above-disclosed compensation with a person or persons who are not mem copy of the agreement, together with a list of the names of the people sharing in the compensation is | |
| □ Debtor □ Other (specify): 5. □ I have not agreed to share the above-disclosed compensation with any other person unless they are represented in the person of the agreement, together with a list of the names of the people sharing in the compensation is | |
| I have not agreed to share the above-disclosed compensation with any other person unless they are r I have agreed to share the above-disclosed compensation with a person or persons who are not mem copy of the agreement, together with a list of the names of the people sharing in the compensation is | |
| ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not mem copy of the agreement, together with a list of the names of the people sharing in the compensation is | |
| copy of the agreement, together with a list of the names of the people sharing in the compensation is | nembers and associates of my law firm. |
| 6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankrup | |
| | cy case, including: |
| a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whethe b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; e. [Other provisions as needed] | ; |
| 7. By agreement with the debtor(s), the above-disclosed fee does not include the following service: | |
| CERTIFICATION | |
| I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me this bankruptcy proceeding. | for representation of the debtor(s) in |
| September 27, 2016 /s/ Lenita M. W. Arringto | |
| Date Lenita M. W. Arrington 25 Signature of Attorney Law Office of Lenita Webb 1027 East Tenth Street Roanoke Rapids, NC 27870 (252) 410-0100 Fax: (252) lenita@attorneyarrington. Name of law firm | Arrington, PLLC |

United States Bankruptcy Court Eastern District of North Carolina

| In re | Anthony Wilson Kristie Wilson | | Case No. | |
|-------|----------------------------------|-----------|----------|----|
| | | Debtor(s) | Chapter | 13 |

VERIFICATION OF CREDITOR MATRIX

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

| Date: | September 27, 2016 | /s/ Anthony Wilson |
|-------|--------------------|---------------------|
| | | Anthony Wilson |
| | | Signature of Debtor |
| Date: | September 27, 2016 | /s/ Kristie Wilson |
| | | Kristie Wilson |
| | | Signature of Debtor |

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Wilson, Anthony and Kristie -

Cavalry SPV I, LLC Attn: Cusomer Care 500 Summit Lake Drive, Suite 400 Valhalla, NY 10595 IC Systems, Inc. P.O. Box 64437 Saint Paul, MN 55164 Onemain Financial/Citifinancial 6801 Colwell Blvd Ntsb-2320 Irving, TX 75039

Cbe Group Attn: Bankruptcy Po Box 900 Waterloo, IA 50704 Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346 Online Collections Po Box 1489 Winterville, NC 28590

CENTURYLINK PO BOX 4300 ATTN: BANKRUPTCY DEPT Carol Stream, IL 60197 Kay Jewelers/Sterling Jewelers PO Box 1799 Akron, OH 44309-1799

Portfolio Recovery Po Box 41067 Norfolk, VA 23541

Credit Collections Svc Po Box 773 Needham, MA 02494 Kirschbaum, Nanney, Keenan & Griffin P.O. Box 19806 Raleigh, NC 27619

Portfolio Recovery Associates P.O. Box 12903 Norfolk, VA 23541

Ditech Attn: Bankruptcy Po Box 6172 Rapid City, SD 57709 Merrick Bank/Geico Card Po Box 23356 Pittsburg, PA 15222 Santander Consumer USA Po Box 961245 Ft Worth, TX 76161

Dominion Power Attn: Bkr. Dept. P.O. Box 26543 Richmond, VA 23290 Mid Am B&T Credit Card Po Box 68 Ralla, MO 65402 Seventh Avenue Seventh Avenue, Inc 1112 7th Ave Monroe, WI 53566

Fst Premier 601 S Minneapolis Ave Sioux Falls, SD 57104 Midland Funding 2365 Northside Dr Suite 300 San Diego, CA 92108 Shapiro and Ingle 10130 Perimeter Paryway, Suite 40 Charlotte, NC 28216

General Motors Acceptance Corp. 801 Cherry Street, Ste. 3500 Fort Worth, TX 76102 Midnight Velvet Swiss Colony/Midnight Velvet 1112 7th Ave Monroe, WI 53566 Southwest Credit Systems 4120 International Parkway Suite 1100 Carrollton, TX 75007

HALIFAX COUNTY TAX DEPT ATTN: BANKRUPTCY DEPT PO BOX 68 Halifax, NC 27839 N.C. Dept. of Revenue Attn: Bkr. Unit P.O. Box 1168 Raleigh, NC 27640-1168 Thomas Law offices, PLLC 7 Skyline Drive, 1st Floor Hawthorne, NY 10532

Wilson, Anthony and Kristie -

Us Dept of Ed 2401 International Madison, WI 53704

Verizon 500 Technology Dr Suite 500 Weldon Spring, MO 63304